

SOCIAL SERVICE REVIEW

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Quality Control in AFDC as an Administrative Strategy

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Of all the initiatives directed toward improving the administration of social welfare programs, the federal government's quality control (QC) systems have been the most successfully implemented and sustained over the last decade. Despite the apparent neutrality of quality control mechanisms, initial findings from our study of the Massachusetts AFDC program suggest that administrative reform to reduce payment error incorporates changes in policy and practice that are inherently political. The distributive consequences of these changes reflect a strong bias toward restricting access to assistance rather than extending it.

Social welfare programs are widely perceived as being poorly administered, resulting in opportunities for abuse by recipients and providers and the wasting of millions of taxpayers' dollars.¹ This perception is shared and reinforced by state and national political leaders who make "cleaning up the welfare mess" a primary focus of electoral campaigns and who, in office, launch reform efforts designed to reduce wasteful government spending for social programs.²

Administrative reform of social welfare programs has a broad constituency, including advocates of both retrenchment and expansion in social spending. Advocates of retrenchment take the position that tight management is necessary to curb excessive spending, which they associate with administrators' greater concern for extension of benefits

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to the needy than for the taxpayers who pay the bills. Advocates of an expanded social welfare state also support administrative reform, although for different reasons. They see mismanagement as discrediting welfare programs. In joining the attack on sloppy welfare administration, they seek not only to improve the delivery of program benefits to those in need but also to restore legitimacy to social programs in order to gain the support of middle-class electoral majorities.

In fiscal terms, administrative reform of the social welfare delivery system is hardly a trivial matter. Major entitlement programs such as Aid to Families with Dependent Children (AFDC), Medicaid, Food Stamps, and Supplemental Security Income (SSI) involve a large part of domestic expenditures. If even a relatively small proportion of these funds is improperly spent, the loss is still substantial.³ The appeal of administrative reform on these grounds alone is obvious.

The Politics of Quality Control

Of all the initiatives designed to improve administration of social welfare programs, the federal government's quality control systems have been the most successfully implemented and sustained over time. One obvious reason is that quality control can be implemented through administrative means, so that this particular initiative for the most part is removed from the hazards of congressional approval and oversight.

Quality control is used by federal agencies to monitor, through selective sampling, state administration of major entitlement programs. Federal authorities measure administrative performance by reviewing each state's conformity with its own rules for distributing federally supported benefits. These are outlined in state plans, which are submitted for approval to federal agencies. Quality control enables these agencies to hold states accountable for their expenditure of federal dollars and to demand administrative improvements when warranted. The ultimate weapon is imposition of fiscal sanctions, based on estimates of state spending error derived from the quality control review.

It would appear that the use of quality control would be a welcome measure: no right-thinking person could be against administrative quality or control if it meant that public funds were being properly spent. However, the implications of quality control are not simple and advocates of administrative reform would be well advised to examine carefully the use of quality control in social welfare programs before endorsing it.

As our study of quality control in the Massachusetts AFDC program suggests, the concept of quality control, which was borrowed from the

factory production line, may be inappropriate for determining quality in the administration of complex social welfare programs. Quality control may be too rudimentary a tool to evaluate administrative quality, and when imposed from above, it may influence management to change the benefits-delivery system in ways that affect benefits distribution.

Thus, in the process of influencing administrative change, quality control may alter the substance of welfare policy by redefining the terms under which individuals are considered entitled to receive public assistance. The distributive dimension of quality control imparts specific political interest to what might otherwise appear to be strictly a management concern. State management reforms implemented under the rubric of quality control may bias administrative performance and in the case of welfare policy may reduce "errors of liberality" while increasing "errors of stringency."⁴ "Errors of liberality" refers to worker errors that result in overpayments to recipients and payments to persons not entitled to benefits. "Errors of stringency" refers to worker errors that result in underpayments and failure to pay persons entitled to benefits. Errors of stringency may also occur as a consequence of the systematic imposition of procedural hurdles, which in the name of administrative prudence increase the difficulty of obtaining benefits for persons who are otherwise eligible. These errors are the most difficult to measure because they are generally associated with worker compliance with procedural rules developed to tighten management control and curb worker discretion.

In the past, the administrative changes implemented to comply with quality control standards have generally been studied superficially, for the most part using the error rate produced by the quality control system as the unit of analysis.⁵ These analyses assume the neutrality of quality control as a management-reform instrument and accept error rate scores as appropriate measures of quality of welfare administration. The validity of such assumptions is thrown into question by a growing body of evidence demonstrating that administrative change, as a medium of policy implementation, is not necessarily neutral; that unintended outcomes may result; and that outcomes of even incremental policy change may be broad and comprehensive.⁶

The study of quality control in AFDC administration provides an opportunity to examine local-level political and distributional consequences of a sustained attempt by the federal government to bring welfare spending under control through administrative means. In addition, quality control can be evaluated as a federal strategy for reaching "out" to state agencies and "down" to local offices to penetrate and control decentralized and relatively autonomous state welfare bureaucracies. The assertion of federal authority and penetration of state bureaucracies involve more than simply improving management and, in fact, impose a set of expectations about welfare that represent a

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distinct attitude and philosophy of the program. The imposition of these standards gives a hidden political meaning to management reform.

In this study of the Massachusetts response to federal quality control demands we will inquire into selected outcomes of the state's management reforms, looking beyond changes in the error rate to changes in state policy, worker practice, and AFDC policy as received by poor families. Since 1979, when Massachusetts had the distinction of paying out the largest amount of dollars in error and achieving the second highest quality control error score in the nation, state authorities have moved aggressively to reduce errors monitored by the Department of Health, Education, and Welfare (HEW), now the Department of Health and Human Services (HHS).⁷

Issues in Controlling Program Quality

Study of the politics of any administrative practice must focus on the scope and bias of that practice. Scope refers to the range of behaviors over which administrative practice seeks to exert influence. Bias refers to the direction of that influence and raises classic political questions, such as who benefits and who is disadvantaged by any particular arrangement.

In theory and in industrial practice administrative mechanisms such as quality control can straightforwardly assume the scope of gaining greater control over the production of workers and may be unbiased in the sense that this control is entirely appropriate within the assumptions of the factory. However, the appropriateness of federal control over state welfare bureaucracies is more problematic.

The scope of quality control.—The states, which deliver federally supported, as well as other, welfare benefits, by law maintain a substantial degree of autonomy, making the federal-state agency relationship quite different from that of factory management and the assembly line. The federal role in welfare has traditionally been restricted to establishing programs for which state participation may or may not be mandatory and reimbursing a portion of the state's cost of participation. The Department of Health and Human Services reimburses states for between 50 and 90 percent of the costs associated with the AFDC program.

Federal quality control is an instrument for influencing aspects of welfare policy that are arguably the states' prerogative. Under the rationale of making states accountable for the expenditure of federal dollars, the federal government through administrative means can assert policy preferences outside the boundaries of normal legislative or even rule-making processes. The politics of quality control is pat-

ticularly interesting because of the indirect ways in which this federal influence is channeled—a process so obscure that state officials may be unaware of how far it extends.

Potential biases in quality control.—In theory, quality control will introduce bias if the measures used to assess the quality of a good or service are not comprehensive. Unbiased measures would have to be multidimensional, touching at least on all significant aspects of the production or performance to be assessed. Moreover, the sanctions accompanying quality control must also extend to all significant aspects of production or performance in order to avoid bias.

To illustrate the importance of these points, consider the inadequacy of an automobile assembly quality control system that carefully assessed the quality of auto engines but neglected to inspect auto finishing. The outcome of too narrow a definition of quality would quickly be obvious as the plant produced thousands of perfectly functioning vehicles whose paint blistered in the sun or washed away in the first rains.

One element of potential bias in quality control may be introduced into state administration of welfare policy by the failure of HEW's quality control system to measure performance comprehensively. Only overpayments and payments to ineligible—errors of liberality—are measured and sanctioned by federal quality control. Quality control measures underpayment but does not incorporate this measure into the state error rates on which fiscal sanctions are based. In the absence of similar attention to other aspects of administrative quality, namely, underpayments and failure to provide benefits to which persons are entitled, one would expect to find a relative increase in errors of stringency.

A second element of bias may be introduced into welfare administration in specifying the meaning of quality so that it can be measured through quality control reviews. Decisions concerning an appropriate standard for administrative performance involve far more than a rational choice among clearly specified alternatives on straightforward grounds. The complexity of these decisions derives from intrinsic tensions and ambiguities in welfare and other social programs.⁸

First, welfare administration requires striking a balance between too many and too few rules and guidelines. Welfare workers typically must struggle with, literally, several pounds of regulations that change frequently. But the regulations are never so cut-and-dried that rules can encompass all contingencies. Inherent in a means-tested welfare system is the requirement that family circumstances and needs be individually assessed. The variety and complexity of these circumstances require a distinct degree of discretion on the part of workers in order to fit general policy principles to specific circumstances. However, the combination of worker discretion, case complexity, and regulatory density

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produces administrative error. The obvious solutions—simplification and standardization—critically constrain the use of discretion which, however flawed its exercise, remains essential to equitable distribution of benefits according to the principle of individual means and needs.

Second, welfare policy reflects a tension between the objectives of extending assistance to the needy and protecting taxpayers from irresponsible or inappropriate claims. This tension is expressed in the philosophically contradictory imperatives that direct workers' actions. Welfare workers are required to assist claimants in making applications and to take their word for some aspects of their claims. However, workers are also expected to be skeptical in evaluating claims for benefits and are frequently required to demand proof that the claimant is eligible for the reasons given. In short, welfare regulations reflect helpfulness and leniency on the one hand, and suspiciousness and stringency on the other.

A third aspect of welfare policy that complicates the specification of administrative performance is the tension between the dual roles of welfare agencies as providers of support for troubled and needy families and as instruments for processing transfer payments. The balance between these two roles has shifted over the years. For example, advocates from across the political spectrum have argued successfully for the separation of social services and assistance payments functions on the grounds that these reforms would liberate social workers from the time-consuming and coercive aspects of claims processing so they could better provide counseling and services.

Nevertheless, workers who function as no more than claims processors are still confronted by individuals who choose, or are sometimes required, to discuss their personal problems and misfortunes when they claim welfare benefits. However, in the administrative reforms of the past decade the ascendant vision of the job has been one of paper processing, in which accuracy and efficiency take precedence over extending help to claimants. This conception of claims processing, much more than the earlier helping model, is imbued with the notion that, as in preparing tax forms or insurance claims, individuals must take primary responsibility for supplying evidence to support their position or claim.⁹

These are not simply disagreements over the role of welfare. These are fundamental ambiguities that are written into state and federal policies, which agencies administer. At issue is whether the multidimensional, complex, and even contradictory aspects of AFDC policy are expressed in the federal quality control system. If, in specifying administrative performance standards, aspects of policy are oversimplified or overlooked, the quality control system will be structurally biased. If, in addition, the scope of quality control extends to state policymaking and worker practice, such bias is likely to alter fundamentally the substantive meaning of the entitlement program without the benefit of formal legislative and policymaking review processes.

Development of the Federal Quality Control System

Nationally, explosive growth in AFDC caseloads and expenditures at the end of the 1960s alarmed politicians and public officials involved with the program. Between 1967 and 1971, the caseload more than doubled, and expenditures rose from \$2.2 billion to \$6.9 billion.¹⁰ This expansion was part of the general growth in social welfare spending following the war on poverty of the sixties, an increase that subsequent administrations feared was "uncontrollable" and also unacceptable in the changed political and economic context of the seventies.¹¹ The prospects of uncontrolled growth in welfare triggered a reaction designed to bring this growth under control.

Two characteristics of the welfare system were particularly blamed. One was the system's complexity, which was alleged to provide unfair advantage to persons skilled enough to negotiate its confusing array of regulations and procedures.¹² A second characteristic subject to criticism was the amount of discretion accorded to social workers, who were said to be excessively lenient in determining eligibility and benefit levels.

Ironically, the same system characteristics were also deplored by poor people's advocates and others favoring expansion of social welfare. They argued that the system's complexity made it difficult for the deserving poor to acquire benefits, and that social workers used their discretion to exercise power over recipients in an arbitrary and oppressive manner. These similar conceptions of the "welfare problem" were based on different reasoning and fundamentally different principles and values.

The major welfare reform initiative that attempted to join these inherently contradictory interests reflected the unstable nature of such an alliance. The Family Assistance Plan, the Nixon administration's major legislative initiative in welfare, attempted to merge these two perspectives by simplifying and standardizing assistance through a form of negative income tax, at the same time restricting eligibility and benefit levels. It failed to win congressional support. Unable to weld these interests into a legislative majority, the administration was still faced with the question of how to get control over rapidly rising expenditures for welfare and other social entitlement programs, short of legislating comprehensive reform or capping expenditures. How could the federal government bring workers in local offices under control when these workers were employees of cities, counties, or states operating under fifty different state plans? How was the federal government to assert control when historically its influence over welfare consisted of approving state plans and offering a variety of options for which states would receive partial reimbursement? In its second

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term, the Nixon administration turned from a legislative to an administrative strategy to control state welfare spending. Quality control was the primary instrument of that strategy.¹³

The quality control system.—The present system of quality control was introduced into the AFDC program in 1973 and later extended to Food Stamps, Medicaid, and SSI with the objective of making states accountable for accurate distribution of federal welfare dollars. By monitoring payment accuracy through a semiannual review of a sample of states' caseloads, HEW attempted to estimate authoritatively the number of cases and amount of dollars paid in error.¹⁴

As presently constituted, each state's welfare department conducts its own quality control review and field investigation of sample cases to determine payment errors involving overpayment and underpayment to eligible persons and payments to ineligible persons. Federal reviewers attached to regional offices review for a second time a portion of those cases. The state and federal error rates are combined by a formula to produce a single payment error score. The score represents the portion of expenditures attributed to overpayments to ineligible. This score provides a basis for determining fiscal sanctions on the premise that the federal government should reimburse states only for payments made in accordance with their state plans. Significantly, underpayments are not included in this score, nor are they considered in assessing fiscal sanctions.

The sanctions controversy.—As established in 1973, quality control regulations permitted HEW to impose fiscal sanctions on states that fell below acceptable standards. The case error "tolerance limits" set by the 1973 regulations were 3 percent for cases with ineligibles and 5 percent for cases with overpayments. After subsequent reviews revealed average state error rates of 10.3 percent and 22.3 percent, respectively, the states quickly contested the imposition of sanctions based on those standards. A federal court agreed that the limits were "arbitrary and capricious."¹⁵

While the issues of appropriate tolerance limits and sanctions were being hotly contested inside and outside of HEW, pressure was building in Congress to cap the appropriation for HEW by requiring the department to achieve savings by reducing administrative error. Bolstered by a 1978 inspector general's report that alleged that HEW misused \$7 billion through "fraud, waste and abuse," Congressman Robert Michel amended HEW's FY 1978 appropriation to require \$1 billion in savings from management improvements.¹⁶

This action was only one indication of pressure building in parts of Congress and HEW to take a harder line on controlling spending. One of HEW's responses was to issue new regulations reinstating quality control sanctions. In a compromise between agency "hardliners" and "liberals," the sanctions provisions were liberalized and absolute tolerance limits eliminated so that states were required to reduce error

at a rate of improvement equal to the average rate of improvement of all states.

This compromise was short-lived, however. At the urging of Congressman Michel, a congressional conference committee report included a directive that HEW impose sanctions on states that failed to reduce their error rates to 4 percent by FY 1983, with reductions to be made in three equal stages.¹⁷

The final rules of HEW enacting this directive were issued in January 1980. The agency uses the April–September 1976 measurement period as the base period for calculating sanctions under these regulations. The more lenient 1979 regulations, which were applied in the interim, did not result in the imposition of sanctions for a variety of reasons, among them that fewer states exceeded permissible limits. Also, just before the change in administrations, Secretary Patricia Harris waived sanctions for states that could demonstrate “good faith” efforts to comply with quality control provisions.

Through quality control HEW established administrative standards to which states were held accountable. But the agency did not overtly encroach on state authority to legislate substantive aspects of policy. In the areas of implementing quality control, the error rate became the critical measure of administrative performance for state welfare agencies.

Administrative Reform in Massachusetts

The administrative standards established through federal quality control provided the framework for efforts to bring the principles of sound management to the Massachusetts Department of Public Welfare (DPW). Quality control was both a catalyst to and instrument of management reform. It provided a means for defining and measuring administrative performance. The DPW reforms then extended this performance standard to local welfare offices and the street level. Politically, the threat of quality control–based fiscal sanctions also provided a means by which administrators could win support for potentially controversial management initiatives. Operationally, a lower quality control error rate was the end product sought by reform. Policies and practices were evaluated for their impact on quality control error. The objective of reducing error required that management assert control over the welfare bureaucracy in order to acquire control over welfare spending. Beginning in 1970 with the appointment of a new DPW commissioner, John D. Pratt, and continuing for more than two years, pursuit of this objective dominated the department’s agenda.

The overwhelming salience of this objective through this period reflects the attractiveness of management reform to diverse interests.

It appeared to many of the actors in the welfare delivery system that both the government and the poor would benefit. The state would benefit financially from restrictions on the expenditure of welfare dollars and avoidance of potential losses in federal reimbursements due to quality control sanctions. Recipients would benefit from receipt of accurate and timely payments and a lesser degree of worker discretion to interfere in their lives. Furthermore, the legitimacy of the welfare system would be enhanced.¹⁸

The context for reform.—The new commissioner had to tackle a backlog of problems in order to bring sound management to the Massachusetts welfare system. It was only in 1968 that the state had taken over welfare administration and financing from the cities and towns, and between 1969 and 1978 Massachusetts AFDC caseloads had increased 166 percent.

Periodic crises and reorganizations had diverted previous administrations from systematically addressing growing management problems. However, by 1979 internal crises had abated and external pressures had changed with the election in 1978 of Governor Edward J. King, who had made welfare mismanagement a key campaign issue, and with the imminent threat of federal fiscal sanctions based on the state's quality control error rate.

The state's 24.8 percent error rate for the period October 1978–March 1979, besides being the second highest in the nation and well above the state's "tolerance limit" for that period, meant the potential loss to the state of \$9 million dollars in federal sanctions. This amount represented more than half the fiscal penalties threatened by HEW nationally for that period. The prospect of sanctions provided an important impetus to the decision of the new DPW commissioner to make management reform his top priority.

A two-part strategy.—A two-part management reform strategy was implemented beginning in late 1979. The first part was directed toward the short-term objective of clearing up specific types of error that would have an immediate and visible impact on the state's error rate. This objective was pursued through a series of relatively brief and intense special projects.

The second part of management's reform strategy was aimed at the long-term objective of institutionalizing management control over a decentralized welfare bureaucracy in which workers had a relatively great degree of discretion in distributing benefits. Changes in personnel, procedures, policy, and oversight were directed toward standardizing the work of the assistance payments workers and holding them accountable to management standards. Imposition of standards and accountability were at the heart of management's efforts.

Targeted error campaigns.—The first-phase attack was aimed at producing an immediate and visible reduction in certain types of error. Although these projects disrupted local office routine, DPW admin-

istrators thought this routine so poor that they had nothing to lose and much to gain if they could actually reduce targeted errors. Among the department's anti-error blitzes were the enumeration campaign and Operation Perform. The title Operation Perform was an acronym for Payment Error Reduction through Field Operations Revision and Maintenance.

The enumeration campaign, launched in December 1979, was designed to insure that a Social Security number was recorded for each AFDC recipient. After Congress made the provision of a Social Security number a condition of eligibility in 1976, quality control reviewers began to count as ineligible any recipient lacking a number. The state's error rate jumped from 15.9 percent in June 1978 to 22.4 percent by September 1979, with enumeration errors accounting for as much as 29 percent of the dollars alleged to be improperly spent.¹⁹

Massachusetts, along with other states, had argued that enumeration errors were "paper errors" that would not result in payment changes when corrected and thus should not be subject to federal sanctions. The states lost that argument. In December 1979 the DPW began an enumeration campaign that lasted nearly four months and involved overtime for hundreds of workers.

Based on computer lists of cases that appeared to contain enumeration errors, workers wrote and telephoned recipients instructing them to come to the welfare office with their Social Security cards or to apply for a number at the Social Security Administration (SSA). Hundreds of recipients were sent to the downtown SSA office, which was quickly overloaded. After waiting in lines at SSA, many recipients learned they would need to obtain birth certificates or other verification of identity and proof of residency before SSA would accept their applications.

Workers who were assigned weekly quotas for correcting enumeration errors were pressed to hold recipients to deadlines. They also had little time to assist clients who might be having difficulty completing the sometimes complicated application process. Recipients who failed to meet DPW deadlines for providing Social Security cards or verifications of completed applications were terminated from assistance.

The enumeration campaign differed from subsequent special projects and institutional reforms. In the enumeration project, there was a one-to-one correlation between correcting the targeted error (absence of a Social Security number) and correcting a potential quality control error. However, other special projects and subsequent institutional reforms only indirectly targeted quality control errors. They did this by establishing rules of procedure associated with accurate case processing, according to DPW analyses.

Perhaps the most ambitious of the special anti-error campaigns was Operation Perform. Initiated in the summer of 1980, it included a mass review of all case files by special teams of reviewers and a re-

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organization and standardization of office record-keeping system. Although the information needed for the accurate determination of eligibility was often in the files, quality control errors occurred when workers did not use information correctly or consistently.²⁰ Operation Perform envisioned both an updating and a standardization of case records in a format designed to show workers and reviewers key pieces of information applied in grant processing and whether records were properly kept. Like prior campaigns, this project targeted aspects of case processing and record keeping that were associated with quality control error.

Institutionalizing organizational change.—The blitzkrieg of special projects was viewed as only an interim measure in the administration two-part reform strategy. In the second phase, management sought to institutionalize organizational changes in order to achieve and maintain a low error rate over the long term. Management sought to control the way in which workers processed claims by standardizing procedure for determining welfare benefits. Procedural requirements were disseminated through new training programs and a worker handbook which specified the steps to be followed in determining claimant eligibility and benefits. Implicit in standardization was a substantial reduction in worker discretion to make judgments based on personal knowledge of the grantee's circumstances. Management developed an internal monitoring system (quality assurance) to hold workers accountable for compliance with these procedural rules.

Another element of management's strategy involved restructuring the workforce. Personnel policies were altered, redefining as clerical the role of the welfare worker and recruiting workers who would fit into a structured, mass processing system.²¹

Standardizing practice.—In specifying what the DPW termed a "prudent standard" of worker practice, the chief concern was to avoid processing errors which would result in overpayments and payments to ineligible and therefore contribute to the quality control error rate. Department analyses indicated that such errors could be reduced if case records were kept up to date, if recipient claims were more thoroughly investigated, and if certain procedural steps were carried out.

The management solution to the first of these points was to increase the frequency with which cases were redetermined. Redetermination is a formal process, mandated by federal regulations, through which workers update case records to reflect frequent changes in circumstances experienced by many welfare families. In conducting redetermination, workers must either call the recipient into the welfare office or conduct a home visit in addition to completing a substantial amount of paperwork. Although monthly redetermination quotas established for workers in 1978 had increased productivity, workers tended to meet their quota by redetermining the least complicated cases. Since these were the

cases least likely to involve quality control errors, management found it necessary to devise a method to target error-prone cases for redetermination.

That method, the DPW's "priority redetermination" system, required workers to meet their quotas according to a descending order of case priority. Cases were given priority if they had characteristics that made them theoretically error prone. Error-prone characteristics included, for example, the length of time since previous redetermination, presence of earned income, dependents in certain age groups, and claimed income deductibles. Also among the priority cases were those in which fraud was suspected based on a comparison of DPW case records and employer wage records compiled by the state Department of Revenue.

An internal monitoring system.—Pressures to meet quotas and deal with the most difficult cases were in some ways counterproductive to management's overriding concern for accuracy because they created incentives to sacrifice quality for quantity in case processing. Management sought to balance these incentives by monitoring accuracy as well as productivity.

In mid-1979 management began to shape its little-used quality assurance system into an instrument that continues to be used by the DPW for establishing, monitoring, and enforcing standards of worker performance. Previously, quality assurance was mainly used to compile productivity figures submitted by local offices. Based on quarterly reviews of 80 percent of the redeterminations conducted in each welfare office, quality assurance produces a measure of case-processing accuracy that is statistically valid at the level of the office supervisory unit.²² Quality assurance produces and publishes a composite performance score for each office, combining the scores for accuracy (the percentage of cases error free) and for compliance with productivity quotas. The composite score gives three times the weight to accuracy as to productivity.

In much the same way that HEW uses quality control to define acceptable administrative standards and hold states accountable, the DPW uses quality assurance to define acceptable worker practice and hold local welfare offices accountable. Formally, the quality assurance document (a review guide) specifies procedural requirements and provides management with a basis for penalizing procedural noncompliance. Informally, quality assurance reviewers link the central office to the field, providing further specification of policy in the process of interacting with local office workers and administrators. In the process of formally and informally specifying the department's "prudent standard of practice" through quality assurance, the DPW extends the federal quality control imperative to workers in welfare offices across the state.

Error as measured by quality assurance.—The document used by quality assurance reviewers to assess worker accuracy in processing redeter-

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minations targets procedural errors associated with quality control. Although a quality assurance error does not necessarily indicate that an overpayment or payment to an ineligible person has occurred, it does indicate whether a welfare office worker complied with department rules and procedures for investigating recipient claims and whether those procedures were carried out consistently and accurately.

For example, quality assurance reviewers check case records to verify that there is either an application for a Social Security number or a copy of a Social Security card for each recipient and that the card numbers match those on the printout from the computer master file. In this case an enumeration error is both a quality assurance error and a quality control error. Quality assurance reviewers also check case records for copies of recipients' birth certificates or other specified verifications of parent-child relationship and birth date. Worker failure to obtain an acceptable verification of birth and relationship is regarded as a quality assurance error because it is associated with quality control overpayments and payments to ineligible, although the absence of verification does not, in this case, mean that the recipient is ineligible for assistance.

Similarly, a variety of quality control errors—including those attributed to excess assets, failure to register for mandatory work training, earned income discrepancies, and incorrect benefits calculations—are addressed by quality assurance, which checks to see that workers (1) obtained verification of bank balances dated within forty-five days of the redetermination; (2) correctly followed procedures for determining whether work registration was required, for example, that workers obtained verification that children over age sixteen were attending school and were therefore exempt; (3) verified work training registration, if mandatory, by supplying a copy of the registration form; (4) obtained five consecutive wage stubs dated within six weeks of the home visit and correctly used them in calculating earned income and deductions (and also obtained proof of claimed work-related expenses); and (5) correctly applied formulas for calculating benefits.

Quality assurance as interpreter of policy.—Management has increasingly specified and standardized procedural rules of practice through the quality assurance document, a new policy manual, and a worker handbook. However, the complexity of regulations and family circumstances still leaves considerable room for interpretation and worker discretion. Informally, quality assurance fills some of the gaps by extending the interpretation of procedural rules to cover additional aspects of case processing as they come to the attention of reviewers.

Such issues tend to be channeled through routine conferences between the local office administrator and the supervisor of the visiting quality assurance review team. Administrators can question or challenge error findings, particularly those in which regulations are unclear. In re

sponding to questions, the reviewer adapts and clarifies regulations and specifies the practices the local offices are required to follow.

An example of the interaction between a reviewer and an office administrator involves a redetermination in which an office worker did not require dependent children to apply for Social Security death benefits. The office director argued that the worker correctly exercised discretion in this case, because case records indicated that the deceased had not legally been declared to be the father of the children receiving AFDC. Therefore, the dependents were unlikely to qualify for death benefits. Regardless of this reasoning, the quality assurance reviewer proscribed the exercise of discretion in this case. According to the office director, he insisted that "you have to go through all the steps."

Quality assurance as enforcer.—Quality assurance has a dual role, not only in defining a standard of practice but also in enforcing it. Based on office quality assurance scores, DPW management threatened to demote directors whose offices did not meet acceptable standards. After the first full round of quality assurance reviews in late 1979, the central office placed seventeen directors on corrective action, a form of probation, warning that they would be demoted unless their office error rates improved. Improvements were recorded, except in the case of one director who later resigned.

The quality assurance scores for supervisory units can also be used by management, from the central and local offices, to pressure supervisors and, in turn, workers to enforce procedural requirements. The key enforcement tool at the supervisory level is the "sign-off." Using quality assurance, management can hold supervisors accountable for the accuracy of the redeterminations they approve (i.e., accuracy as defined by quality assurance). The sign-off is important to workers, because they do not receive credit toward their redetermination quotas until the supervisor has approved their paperwork. Under terms of their union contract, workers are obligated to meet redetermination quotas and may be placed on corrective action, barred from promotion, and possibly dismissed if their quotas are not met. Thus, quality assurance indirectly exerts pressure on workers to comply with procedural rules in order to avoid problems in meeting redetermination quotas.

Restructuring the work force.—To consolidate its procedural reforms, management introduced several changes geared toward altering the definition and composition of the work force. The work force was restructured as part of an effort to remodel the DPW into a claims-processing organization similar in structure and function to an insurance company. In 1979 the DPW created a new Civil Service position for financial assistance workers, defining a job, once held by professional social workers, as clerical. Financial assistance workers were required to have a high school diploma and two years experience in a human-services organization. In recruiting and training workers, the DPW

The review of negative errors differs methodologically from the quality control review of overpayments and payments to ineligible in two critical ways. First, reviewers assess only whether the denial or termination was correct for the reason given in the case record. They do not make an independent evaluation of recipient eligibility, as in the regular quality control review. Thus, the quality control review of negative actions assumes case records are accurate, but the search for overpayments and payments to ineligible does not. This significant methodological difference reflects HHS's narrow interest in finding excess state payments rather than determining comprehensively that states are correctly applying AFDC policy.

Second, no dollar value is ascribed to negative errors. The negative error figure represents only an estimate of the proportion of cases incorrectly denied or terminated. It does not show the savings to the state from withholding benefits from those entitled to receive them. Since entire families may be denied benefits in such circumstances, a small number of cases could potentially have a significant dollar value.

Quality control as a performance measure.—A more serious question concerning quality control as a measure of administrative accuracy is whether by penalizing only errors of liberality it creates a bias favorable to errors of stringency. Critics of the quality control system have repeatedly warned that states might develop more restrictive practices in order to avoid quality control sanctions. This point was raised repeatedly in congressional testimony and in discussions with HEW.²⁸

Critics also argued that in states that lost federal dollars because of fiscal sanctions, the poor would suffer because states would be compelled to reduce benefits and, ironically, the quality of administration.²⁹ In response, Congress included provisions in its conference committee report on the supplemental HEW appropriation that "under no circumstances are any payments to legitimate recipients to be curtailed or even delayed" as a result of implementing quality control procedures.³⁰

Unless these provisions were subject to enforcement, one would expect states to pay attention to aspects of policy delivery for which they were likely to be held accountable. In the absence of contrary influences, one would expect concern for other aspects of policy delivery to be displaced.³¹ The Massachusetts response to the threat of quality control sanctions reflects these elementary propositions of organization theory. Beginning in 1979, the objective of reducing the quality control error rate for overpayments and payments to ineligible became the DPW's top priority. It provided the rationale for fundamentally restructuring the welfare department and determining the allocation of administrative resources.

The management reforms developed in response to quality control were imposed on a welfare system inherently complex and interwoven with contradictory objectives. The strategy posed as a solution to ad-

ministrative errors implicitly treated this complexity as if it were simple. The tension between rule boundedness and discretion was resolved in favor of the former. The tension between a standardized and an individualistic basis for determining benefits was heavily weighted toward the former. The objective of protecting the public coffers superseded that of extending assistance to those in need. These resolutions of the contradictory impulses inherent in welfare administration emerged as a logical response to quality control. Furthermore, they had substantive policy consequences.

Increase in administrative stringency.—The DPW's two-phased, anti-error strategy appears initially to be a straightforward attack on procedural errors through targeted special campaigns and institutionalization of a "prudent standard" of worker practice. However, consistent with the logic of quality control, management's specification of procedural rules designed to curb errors of liberality resulted in more restrictive criteria for procedural eligibility.

In fact, in the name of reducing error, the DPW's special projects tightened eligibility requirements beyond the limits of the agency's own regulations. For example, the rules of the enumeration campaign permitted workers to accept only one form, called an ENUM-2, as verification that a recipient had applied for a Social Security number. This form, which could only be obtained at the welfare office, had to be signed by a Social Security official and returned to the welfare office. Recipients whose files contained other documentation, including forms supplied by the welfare department until only two months prior to the enumeration campaign, were required to reapply for numbers and provide the new forms as proof. Although regulations continued to permit other forms of verification, workers were instructed that there were "no alternatives" to the rules described above.³²

Similarly, during Operation Perform, workers were required to correct cases in which recipients had registered for mandatory work training more than one year before. They also were not permitted to accept evidence other than an official birth certificate or baptismal certificate as verification of grantee ages and relationships. However, DPW regulations continued to require that recipients register only once for work training and listed nineteen types of acceptable verification of age and relationship.³³ Nevertheless, even after Operation Perform many workers operated under the impression that the stricter requirements were department policy.

Limits on worker leniency.—Quality assurance, the chief instrument for extending the principles of management reform to the local offices, held workers and supervisors accountable for routine compliance with a stringent standard of practice. In monitoring compliance with selected procedural rules, quality assurance curtailed worker discretion to make judgments that might be regarded as lenient. It did this by specifying

verification requirements that required all claimants to prove a wide variety of aspects of eligibility and limited the types of proof that could be accepted.

The "prudent standard" of worker practice, which was institutionalized through quality assurance, in effect repealed HEW's "declaration standard," which accepted a claimant's declaration of pertinent facts unless there was reason for doubt.¹⁴ Quality assurance also narrowed the definition of acceptable verifications by more narrowly specifying sources, methods, and dates.

Both the shift to a verification standard and the tightening of that standard are illustrated in the case of an encounter we observed between a local office administrator and a quality assurance reviewer. Quality assurance found a case in error because the worker failed to obtain verification that the recipient had registered for a mandatory work training program. The office administrator pointed out that the case record included a dated notation from the worker indicating that he had received verification by telephone from the state employment agency. The quality assurance reviewer acknowledged that both DPW regulations and the review document stated only that the worker must obtain a communication from the agency verifying registration. However, he maintained that the finding of error was appropriate, explaining that "although the manual isn't clear, we've just always taken [it to mean that] when we say verification, it has to be in writing." He added, "It's not a question of doubting the validity of the verification."

There is evidence that DPW officials were aware that the standard established by quality assurance at times conflicted with the agency's own regulations. An internal memo prepared during the development of the quality assurance document states that although regulations required recipients to register only once for work training, quality assurance demanded evidence of a second registration for cases transferred between DPW offices.¹⁵ Quality control errors had occurred because the DPW was often unable to keep track of registration records for transferred cases. In this memo, a top DPW official questioned whether it is "sound evaluation practice to evaluate performance not spelled out in policy" or whether policy should be revised to be consistent with quality assurance. Although neither the regulations nor the review document were changed, policy was in effect rewritten by continuing to count as an error worker failure to verify the second registration.

These exchanges illustrate two significant aspects of the state's response to quality control. First, concern over reducing quality control error played a primary role in the development of welfare policy. At times, administrators intentionally rewrote policy regulations in order to reduce errors of liberality. However, such policy changes also accumulated through even less visible and formal means, as quality assurance reviewers, in attempting to do away with procedural leniency,

filled gaps and clarified ambiguities in department policy. One member of the quality assurance unit explained, "We're the only people of authority the local offices see. They ask a question and our supervisors respond. And that's the word of God."

Second, although the burden of ensuring administrative accuracy was often shifted from the bureaucracy to recipients, DPW documents indicate official disinterest in this aspect of administrative change. The memo cited above is consistent with evidence from other department documents and interviews that suggests that proposed policy changes were evaluated solely with regard to their potential impact on quality control error.

Selective enforcement of policy requirements.—Management reforms introduced more stringent requirements for procedural eligibility, and they also reflected nearly total disregard of DPW regulations intended to improve poor people's access to benefits that meet individual needs. In the drive to reduce error, regulations were ignored that made workers responsible for assisting recipients who had problems in obtaining required verifications; that permitted recipients to receive extensions when unable to meet deadlines for providing verifications; that required workers to fully inform recipients of the range of benefits to which they were entitled, that established time standards for workers to update case records to indicate changes that would increase AFDC benefits (such as the birth of a baby); that permitted recipients under certain circumstances to provide verifications other than those preferred by the department.³⁶

The DPW reforms not only failed to enforce policies that would improve access to benefits, but they also failed to monitor and penalize worker actions that wrongfully denied or terminated benefits. Quality assurance reviewed only active cases; wrongful denials and terminations were thus beyond scrutiny, and the quality control review of negative case actions was too limited in scope and method to be used as an instrument for extending management control over errors of stringency to the street-level worker. In the absence of monitoring and enforcement, workers were not held accountable for the reasonableness of demands for verification or even their judgments concerning categorical eligibility in cases involving denial or termination of benefits.

Penetration of worker practice.—One would expect the bias toward stringency, which was incorporated into DPW policy and enforced through the threat of quality assurance sanctions, to be reflected in worker practice. Where multiple objectives exist, the rational worker will invest limited resources to meet selected objectives. Given limits on available time, one would expect workers to give priority to meeting objectives that are subject to management monitoring and compliance enforcement. This hypothesis is supported by our observations over a six-week period in Boston's second-largest welfare office (with an

active AFDC caseload of about 6,000) and in extensive interviews with sixteen workers and supervisors from that office.

Among multiple objectives, workers gave priority to meeting redetermination quotas, since they could expect to be subjected to management sanctions if they failed to reach their quotas. Workers found it costly to be lenient in determining which verifications to demand from recipients because supervisors (under scrutiny by quality assurance) could slow redetermination production by returning cases to workers for additional verification of eligibility claims.

Furthermore, workers striving to meet productivity quotas and complete assignments for special projects found it costly to engage in "helping" behaviors. If workers were to meet production demands, they would not have time to explain carefully to each recipient how to obtain all necessary verifications or to help them in that process. Admitting that benefits to claimants are sometimes denied because they cannot negotiate verification requirements, one worker acknowledged, "It gets to the point where you can't be as sympathetic as you ought to be. You don't have time to do everything."

Workers who are confronted with multiple demands and limited resources develop informal methods for coping with job pressures.¹⁷ To cope with productivity quotas, welfare workers devised procedural shortcuts to avoid processing delays and learned to avoid tasks that would interfere with productivity objectives. The routine coping mechanisms they developed to reduce the costs of complying with management demands also reflected a bias toward stringency.

One common shortcut was to instruct claimants to produce all verifications that might be required, without making individual judgments based on case circumstances, as DPW regulations require. Since excessive demands were not monitored or sanctioned, workers could be overzealous in anticipating verifications that a supervisor might demand. Some workers also avoided delay by routinely telling recipients to provide verifications within one to three days rather than the ten to twenty-two days permitted by policy.

Workers also lowered the cost of complying with measured performance standards by avoiding tasks that did not contribute to their scoring on these measures. Workers who were not specifically assigned to respond to recipient requests, a task generally limited to one duty officer for each unit, would commonly avoid seeing grantees or ignore telephone calls. Requests for aid were effectively rationed by this avoidance strategy.

Furthermore, even if recipients could get to see a worker, their requests might be ignored. Not surprisingly, workers told us that requests from recipients to add new babies to their grants, changes of address, and requests for special assistance or social service referrals were often placed at the bottom of piles of more pressing paperwork and, eventually, forgotten.

Effects on bureaucratic norms and attitudes.—Implicit in the Massachusetts management reforms was the assumption that part of the “welfare mess” was the welfare worker. State officials recognized that new department policy and practice standards needed to be consolidated through changes in the normative determinants of bureaucratic behavior. Thus, in addition to tightening procedural rules and requirements, management also altered the composition of the welfare bureaucracy. This is hardly a new strategy. In fact, it was effectively applied by the Nixon administration in its effort to gain control of the HEW bureaucracy.³⁸ Social workers—who were believed to be excessively oriented toward extension of benefits, autonomy in determining eligibility, and the principle of the “declaration” standard—were increasingly replaced by financial assistance workers, who were thought to be more receptive toward restricting payments and rule-bound mass processing of recipients. Stringent management policies were therefore imposed on a more responsive work force.

Representative of this “new breed” of worker was a man we interviewed who was highly regarded by his superiors for his efficiency. He expressed his attitude toward his job in this way. “I like to just do the paperwork and let the more compassionate people do the other work. Anyway, the job is structured so it’s like a machine. You just have to process the financial work and papers. If I spent three hours talking to someone about their problems, I’d have to explain why I didn’t meet my quota.”

Another effect of management’s campaigns against error and fraud and the general emphasis on its prudent standard was to cue workers that recipients were not to be trusted. Although this has long been a belief of many welfare workers, the management activities initiated to reduce error reinforced these negative attitudes and provided legitimate channels for their expression. (An illustration of this type of attitude can be drawn from an interview with an intake worker who complained that DPW policy in providing benefits to pregnant women was too lenient. He contended that reverification of pregnancy every three months was inadequate to prevent fraud, because women were able to use pregnancy as a device to obtain benefits, verifying pregnancy at the end of three months, and then having an abortion and collecting an additional three months of benefits.)

The conflicting tendencies between skepticism toward those making claims and the desire to assist those in need—a contradiction intrinsic in welfare programs—was strongly tilted toward the former. Policy and practice were intentionally structured to increase verification requirements, and management reduced worker discretion to accept the statements of recipients and to excuse recipients from supplying proof of their claims.

The cost of claiming benefits.—Management reforms initiated to reduce quality control error were intended to make it more difficult for persons who did not deserve AFDC benefits to obtain them. Although over-

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payments and payments to ineligibles involved a relatively small portion of the state's caseload, the cost of complying with procedural eligibility requirements was raised for all families.

In September 1979, 11.3 percent of the AFDC cases were purported to be ineligible.³⁹ Stringent verification rules were applied in contradiction to HEW's own declaration standard. Worker discretion to determine the need for a higher standard of proof in individual case was curbed at the same time that workers had additional incentive and opportunity to use discretion to determine verifications in excess of normal requirements.

In order to obtain verifications, claimants incurred costs in time travel, and fees. Claimants were routinely required to obtain verifications which required that they visit each child's school to obtain proof of attendance, City Hall to purchase notarized copies of birth certificates and the Social Security Administration to apply for cards. For most claimants, these examples do not constitute even the bare minimum of routinely requested documents.

As redeterminations were made more frequent in order to combat quality control errors, recipients were put through these procedural paces more frequently. Working recipients were apt to be called into the office every three months and required to provide three to five weeks of consecutively ordered pay stubs and receipts for work-related expenses. If any information was missing from the stubs, such as deductions for health insurance, they were sent back to get it. Obligatory trips to local welfare offices increased as claimants were required to undergo more frequent redeterminations or reapply for welfare after being cut off for failure to meet procedural requirements.

At the same time that procedural hurdles increased, the capacity of claimants to comply did not. In a confusing and constantly changing system, claimants found it difficult, at times impossible, to anticipate worker demands. Furthermore, under pressure to meet performance standards, workers had little time to help claimants through the welter of rules and regulations, much less to investigate whether they were entitled to benefits beyond those requested.

The DPW's program of management reform substantially increased procedural barriers for poor people seeking welfare benefits. Restrictive practices incorporated into the routine administration of welfare policy differ from other forms of rationing that occur in delivery of public service.⁴⁰ Unlike the rationing that occurs because of uncontrolled worker behaviors, in the case of quality control, barriers to the acquisition of benefits were imposed intentionally, systematically, and consistent with the intent of authorities to restrict access.

Unlike limitations imposed by changing eligibility criteria, however, rationing resulting from quality control occurred more obliquely. This rationing did not require an a priori determination of who was in appropriately applying for public assistance. Rather, it increased the

probability that ineligible claimants would be discouraged, without specifying who those claimants might be.

Procedural barriers to assistance.—Ultimately, the most important question is whether quality control, as a mechanism for achieving management reform, also became a vehicle for procedural disenfranchisement of poor families. The potential that such a policy outcome could occur exists independent of the motives or intent of public officials involved in developing and implementing quality control systems. Evidence on this question is extremely difficult to assess because the most complete source of data on the quality of welfare administration is the quality control system, whose findings are at issue. However, available data support the hypothesis that families have been denied benefits to which they are entitled by law because of the increased procedural stringency associated with quality control reforms.

Boston area welfare offices have often been the focus of the DPW's anti-error efforts, since the city's error rates tend to be as much as one-third higher than the rate for the state as a whole. In addition, Boston accounts for nearly one-quarter of the state's AFDC caseload. One would expect the restrictiveness of management reforms to be most clearly visible in these offices and, more specifically, at the point of initial application, before individuals learn how to operate within the welfare system and where procedural protections are probably weakest.

A review of data on applicants denied entry into the system indicates that denials rose gradually in Boston between the end of 1977 and the end of 1980, with a net increase over time of about one-third (table 1). The data also indicate that the proportion of applicants denied for procedural reasons rose nearly twice as fast, leveling off slightly at the end of the period for a net increase of roughly 60 percent.

Of course, these figures could indicate either improved administrative performance in screening out ineligible or the development of structural impediments to the acquisition of benefits. To some degree both interpretations may apply. Data collected on fair hearings, the administrative procedures used to adjudicate recipient-initiated grievances, clarify this issue. An analysis of fair-hearing data for the Boston region from 1978 through 1980 indicates a 31 percent increase in hearings in which the failure to comply with verification requirements was at issue.⁴¹ The DPW hearing examiners decided these cases increasingly more frequently in favor of the claimants, overturning denials in 63 percent of the cases in 1978, 73 percent in 1979, and 80 percent in 1980. This suggests that the increase in denials was at least in part associated with a simultaneous increase in excessive procedural stringency, as determined by hearing officers applying the DPW's own standards.

Fragmentary evidence concerning the impact of quality control reforms on termination of benefits suggests that recipients, at least temporarily, have lost benefits for procedural reasons. In Boston welfare

Table 1

PERCENTAGE OF DENIALS BY QUARTER FOR BOSTON REGION WELFARE OFFICES, OCTOBER 1977-SEPTEMBER 1980

DENIALS	1977 (4th)	1978				1979				1980		
		1st	2d	3d	4th	1st	2d	3d	4th	1st	2d	3d
Applications denied	21	20	26	26	29	28	29	31	31	31	29	28
Applications denied for procedural reasons*	13	16	16	15	19	19	19	20	23	23	22	21

SOURCE —Massachusetts Department of Public Welfare, 3800 reports

* Reason listed for denial was either failure to comply with procedures or failure to provide verification

offices, the number of cases reinstated shortly after termination has been rising.⁴² This is not easily explained if one assumes that substantive changes in family circumstances infrequently occur within a few weeks of termination. However, it seems plausible that such an increase could be related to recipient difficulties in meeting deadlines for procedural requirements. In one large Boston welfare office, where reinstatements within a month of termination varied in 1980 from a low of 6 percent to a high of 32 percent, the higher reinstatement rates tended to occur during months in which special anti-error activities were in progress.

Even more intriguing are DPW data that indicate a 143 percent increase between 1977 and 1980 in cases closed and reopened on the same day. Although the number of cases is quite small, these data suggest, and our interviews tend to confirm, that some workers backdated selected reinstatements so that recipients would not lose one month of benefits.⁴³ Workers were most likely to employ this procedure when they believed recipients had tried to comply with procedures, but for reasons beyond their control had been unable to meet the deadlines. This is consistent with the findings of a national survey in which 40 percent of the recipients who reapplied after failing to meet deadlines for procedural compliance said their workers had advised them to reapply.⁴⁴

Not unexpectedly, the DPW's own analysts were unable to explain a 15.9 percent increase in terminations and a 47.3 percent increase in terminations for procedural reasons between the first and second quarters of 1981. Despite the ambiguity of these data, DPW analysts interpret them as indicating that workers have become more prudent in processing cases, and they assume the propriety of closing large numbers of cases on strictly procedural grounds.⁴⁵ However, as we have attempted to demonstrate, such an assumption lacks credibility. These data might as well indicate removal from the welfare rolls of otherwise eligible recipients according to their ability to negotiate difficult procedural obstacles. This distributive effect is echoed by the same HEW analysis that found that one in four clients had difficulty complying with procedural requirements.⁴⁶ Included among the obstacles were an inability to understand forms and verification rules and problems contacting their workers or appropriate agency officials.

The hidden casualties.—The campaign for quality control has produced some hidden casualties and has left the system with an accelerated agenda of restrictive policies and practices. As we have shown, the logic of quality control, the policy of imposing sanctions only for errors of liberality, and the practice of increasing procedural hurdles for recipients have led to the implementation of new welfare policies in the name of improving administrative quality.

We have also shown that available data on overall trends in Massachusetts AFDC support the contention that unrecorded—virtually

ignored—negative effects on eligible recipients have resulted from the impact of innovations responsive to quality control. We are unable to specify precisely the incidence of hardship and disenfranchisement for the same reason that quality control itself is able to ignore the negative consequences for recipients. The system fails to collect data on the accuracy or appropriateness of decisions to deny benefits or terminate assistance. The quantitative evidence we have pieced together, however, uniformly supports the proposition that the ability of at least some claimants to obtain assistance has been severely diminished by the quality control-inspired innovations.⁴⁷

Conclusions

"Error rate at all-time low," reads the headline of a recent issue of the Massachusetts DPW's internal newsletter. "At one time among the nation's highest," Commissioner William T. Hogan said, the current state error rate "is now among the lowest."⁴⁸ The impressive performance of the Massachusetts DPW in reducing error may suggest that victory over high error rates is surely within reach and that this phase of the war on sloppy welfare administration may soon be over.

Furthermore, quality control could be superseded as a mechanism for containing entitlement program costs as more direct strategies become politically feasible. The significant changes in welfare policy won by the Reagan administration indicate that cutting back welfare has graduated from the indirect administrative attacks of the past decade to more overt reductions in benefit levels and categories of eligibility. In addition, if the administration succeeds in further returning responsibility for welfare programs to the states, welfare agencies would likely enjoy a higher degree of freedom from federal scrutiny. Moreover, as error rates decline, recognition should begin to emerge that complicated administrative systems of all sorts sustain some degree of error that cannot be eradicated without unacceptably high costs in administrative overhead or program redesign.

Despite these observations, we are not ready to predict that the war on error can be or will soon be declared over. High error rates in AFDC remain potent weapons in legitimizing welfare cutbacks. Those who hold these aims are likely, in the fashion of classic goal displacement, to seek zealously to root out smaller and smaller amounts of residual error. (The Reagan administration's FY 1983 budget, for example, proposed fiscal penalties for state payment error rates over a 0 percent threshold.) Or they may discover new sources of error that require their attention. Furthermore, adjusting to the current round of changes

in welfare policy enacted by Congress this year (such as monthly reporting and retrospective budgeting) is likely to produce new sources of quality control error to which the states will have to respond.

Because in many ways the war on error has been highly symbolic, affecting significant policy changes in the states in the name of improved administration, there may be no achievable amount of error rate reduction that will satisfy the public demand that welfare administration be cleaned up. In this sense poor welfare administration may be a social policy myth—a widely held belief that cues public responses, in this case contributing to the illegitimacy of the welfare system—and not necessarily dependent upon verifiability.⁴⁹ It is an interesting empirical question how much error rates would have to fall for public views of welfare administration to improve significantly.

Quality control as a strategy.—With respect to runaway welfare costs, what kind of strategy is quality control? Quality control may be seen as a technique to achieve what we may call problematic disenfranchisement. In contrast to categorical disenfranchisement, in which the groups considered to be deserving of benefits are legislatively redefined and reduced, problematic disenfranchisement reduces the number of eligible persons when policymakers are unwilling to specify who should be cut.

In effect, quality control may be said to be directed toward reducing the rolls without specifying who is unworthy, but designed with the conviction that unworthy recipients will be revealed through tightened administrative processes. No doubt tighter administration does make it harder for ineligible persons to obtain benefits, but quality control as implemented also makes it harder for eligible persons to obtain benefits, in particular those who require welfare workers' legally mandated help and flexibility to get on the rolls.⁵⁰

Despite indications of its restrictiveness, there is a high degree of legitimacy associated with the quality control system. The following attributes of quality control contribute to this legitimacy: (1) it mobilizes the symbols of "quality" and "improved administration"; (2) it is metaphorically associated with technical processes bearing scientific management overtones;⁵¹ (3) it is apparently directed at a problem in the welfare system that at least superficially concerns policy officials who otherwise hold widely varying views of welfare reform, and (4) its positive contributions can be trumpeted, while its negative consequences are largely hidden from public scrutiny.

The reasons why the negative consequences can be obscured from public view bear inspection. First, in order to reduce quality control error, states had to influence the routine behaviors of lower-level workers. However, the cumulative effects of these behaviors are not fully evident unless data are collected to reveal them. Second, although it would be possible to evaluate state performance to include errors of stringency, data on negative consequences to recipients are not collected in a

useful form. Quality control therefore provides no capacity to assess negative effects.

Most important, quality control was promoted and implemented through administrative processes that skirted implicit issues of disempowerment. Such issues normally are debated and resolved in a different social policy arena, one populated by vigorous and relatively effective groups and advocates who have allies among congressmen and other political constituencies. These groups are not so much less attentive to administrative policy changes as they are less able to mobilize their influence to challenge administrative reforms.

The administrative politics of quality control.—In theory, quality control could meet many of our major objections by systematically requiring states to achieve comprehensive program accuracy and, when necessary, to improve their performance on wrongful underpayments and inappropriate denials and terminations. However, although we have reviewed at some length the technical details of quality control and its implementation, the fundamental problems are political, not technical.

At issue are political questions regarding whether we wish to have a welfare system that takes a positive role in extending benefits to those entitled to assistance, or whether we wish, instead, to focus attention on restricting benefits to those not entitled, even if in doing so we err on the side of excessive stringency. Also at issue is whether decisions to limit the provision of social benefits to the poor should be made through the hidden mechanism of administrative reform or whether such decisions properly belong on the public agenda.

In Massachusetts, improvement in administrative accuracy resulted in part from the unacknowledged and often unrecognized political decision to define accuracy in terms of program restrictiveness. The other vision of welfare—responding to need, respecting claimants, and providing help in negotiating the system (all incorporated in state policy)—is submerged, diminished, and dismissed by the administrative politics of quality control.

Notes

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1 For a review of public opinion polls on this subject, see Martin Anderson, *Welfare The Political Economy of Welfare Reform in the United States* (Palo Alto, Calif.: Hoover Institution, 1978), chap. 3.

2 Correcting administrative excesses in welfare was a constant theme in the 1980 presidential election. Candidate Ronald Reagan "at almost every stop" pledged to cut what he said was waste and extravagance in social programs (*New York Times* [October 24, 1980], p. A-14). For the concerns of other political figures see, e.g., M. Kenneth Bowler, *The Nixon Guaranteed Income Proposal* (Cambridge, Mass.: Ballinger Publishing Co., 1974), pp. 26, 58, 95; Daniel P. Moynihan, *The Politics of a Guaranteed Income* (New York: Random House, 1973), p. 80, and Russell B. Long, "Welfare Cheating: Address of Hon. Russell B. Long" (U.S. Senate, Committee on Finance, March 14, 1972).

3 AFDC, Food Stamps, and Medicaid alone accounted for \$35.2 billion in expenditures for FY 1981. These programs, excluding Social Security and railroad retirement funds, make up the bulk of the entitlement programs whose runaway costs so alarm fiscal conservatives (*New York Times* [December 21, 1980], p. E-3).

4 John Mendeloff, "Welfare Procedures and Error Rates: An Alternative Perspective," *Policy Analysis* 3 (Summer 1977): 357-74.

5 This is not surprising given the unavailability of alternative sources of data on administrative performance. Although analysts may express reservations about the validity and reliability of quality control data, they are regularly used, e.g., in Marc Bendick, Jr., et al., *The Anatomy of AFDC Errors* (Washington, D.C.: Urban Institute, 1978); Irving Pihavin et al., *Administration and Organizational Influences on AFDC Case Decision Errors: An Empirical Analysis* (Madison: University of Wisconsin, 1979); U.S. Department of Health, Education, and Welfare, "Service Delivery Assessment of AFDC Negative Case Actions" (Region VI Office of Service Delivery Assessment, January 15, 1979).

6 For discussions of the political nature of administrative change, see, e.g., Bryan D. Jones et al., "Service Delivery Rules and the Distribution of Local Government Services: Three Detroit Bureaucracies," *Journal of Politics* 40, no. 2 (1978): 332-68; Pietro Nivola, "Distributing a Municipal Service: A Case of Housing Inspection," *Journal of Politics* 40, no. 1 (1978): 59-81; Richard T. Nathan, *The Plot That Failed: Nixon and the Administrative Presidency* (New York: John Wiley & Sons, 1975). For a discussion of policy outcomes and incremental reforms, see Frank Levy et al., *Urban Outcomes: Schools, Streets, and Libraries* (Berkeley: University of California Press, 1974), and Charles E. Lindblom, "Still Muddling, Not Yet Through," *Public Administration Review* 39, no. 6 (1979): 517-26.

7 This paper presents some of the issues and initial findings of a three-year research project on this subject. Evelyn Boddin presents the final results of this project in her doctoral dissertation, "The Error of Their Ways: Reforming Welfare Administration through Quality Control" (MIT, Department of Political Science, 1983).

8 See William H. Simon, "Critical Legal Theory and the Social Science Tradition: Legality, Bureaucracy, and Class in the Welfare System" (paper presented at the Annual Meeting of the Law and Society Association, Amherst, Mass., 1981), and Duncan Kennedy, "Form and Substance in Private Law Adjudication," *Harvard Law Review* 89, no. 9 (1976): 1685-1778.

9 Christopher Jencks, "The Poverty of Welfare: Alternative Approaches to Income Maintenance," *Working Papers for a New Society* 1, no. 4 (1974): 5-9, 59-74.

10 U.S. Department of Health and Human Services, Social Security Administration, *Social Security Bulletin: Annual Statistical Supplement, 1977-79* (Washington, D.C.: Government Printing Office, 1980).

11 Martha Derthick, *Uncontrollable Spending for Social Services Grants* (Washington, D.C.: Brookings Institution, 1975).

12 Among the most skilled were the Welfare Rights Organizations (WROs), which had become adept in winning special needs grants and parlaying that skill into an incentive to recipients to join their organizations. An early reform that effectively diminished the organizing power of WROs was to simplify the determination of benefits by replacing special grants with a flat grant, which eventually was incorporated into the regular welfare payment (Lawrence Bailis, *Bread or Justice* [Lexington, Mass.: Lexington Books, 1974]).

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13 The Nixon administration asserted control over the welfare bureaucracy by implementing the quality control system of monitoring state agency performance imposing fiscal sanctions and also by reorganizing HEW to diminish the influence of "old line" professional social workers relative to a new breed of financial and management technicians (Ronald Randall, "Presidential Power versus Bureaucratic Intransigence: The Influence of the Nixon Administration on Welfare Policy," *American Political Science Review* 78 [1979]: 795-810).

14 Nationally, state quality control reviewers sample a total of about 45,000 cases semiannually (U.S. Library of Congress, Congressional Research Service [1977], *Administration of the AFDC Program: A Report to the Committee on Government Operations* [Washington, D.C.: Government Printing Office, 1977]).

15 In the case of *State of Maryland et al. v F. David Mathews et al.* (Civil No. 75-63), the federal district court in Washington, D.C., enjoined HEW from imposing sanctions on the basis of the 1973 tolerance limits, although it did not prohibit agency from using sanctions as an administrative tool. Thirteen states and Los Angeles County, California, eventually joined the suit. California joined as a plaintiff-intervenor.

16 The report was issued after the Inspector General's office had existed for nine months. It offered "best estimates" of fraud, abuse, and waste in key HEW programs for FY 1977, totaling between \$6 and \$7 billion in HEW expenditures. In the AFDC program, the Inspector General estimated \$669 million of \$6.3 billion in expenditures were improper (U.S. Department of Health, Education, and Welfare, Office of Inspector General, *Annual Report April 1, 1977-December 3, 1977* [Washington, Government Printing Office, March 31, 1978], p. 2).

17 *Congressional Record*, H-6972, July 31, 1979.

18 These multiple objectives are expressed by former Commissioner Pratt in an article that provides an excellent description of DPW's administrative reforms from the managerial perspective (John D. Pratt, "State Agencies Can Be Managed: Massachusetts Experience with Reducing AFDC Error Rates," *New England Journal of Human Services* 1, no. 2 [1981]: 20-26).

19 Massachusetts Department of Public Welfare, "AFDC Quality Control Statistical Analysis" (January 21, 1980).

20 The DPW estimated that 40 percent of its quality control error rates result from the agency's failure to take action on available information (Massachusetts Department of Public Welfare, "Corrective Action Plan: Aid to Families with Dependent Children" [October 20, 1980]).

21 Pratt, p. 24.

22 For an overview of the quality assurance system, see Massachusetts Department of Public Welfare, memorandum to assistance payments staff (AP/SDM-81-2) (January 9, 1981).

23 Pratt, p. 26.

24 Massachusetts Department of Public Welfare, "AFDC and GR Caseload Report April-June 1981" (July 30, 1981).

25 Despite distrust of the QC methodology, especially among the states, HEW of imputed direct savings from the reduction in the error rate and the termination of benefits to "ineligible" families. In 1976, HEW credited the quality control program with removing 490,000 recipients, or 175,000 families, from the welfare rolls (Rapoport, p. 806).

26 U.S. Comptroller General, "Better Management Information Can Be Obtained from the Quality Control System Used in the Aid to Families with Dependent Children Program" (Report to the Committee on Finance, U.S. Senate, HRD-80-80, Washington, D.C., 1980).

27 Quality control negative case error reviews, conducted sporadically between 1967 and 1973, were discontinued by HEW when the quality control system was upgraded and expanded in 1973. These reviews were only resumed in 1976 in response to pressure from a federal judge in a case filed by the National Welfare Rights Organization Federal Register, December 22, 1976, to amend 45 CFR 205.25).

28 In formal comments on the proposed fiscal sanction regulations, the Central Social Welfare Policy and Law stated that a sanctions policy that ignores underpayment and negative case errors (denials and terminations) is likely to have an unfair and ad-

effect on recipients. The statement contends that states will "most easily accomplish reduction in the overpayment errors for which they will be penalized by measures which virtually presume ineligibility absent (sic) overwhelming proof to the contrary and which will increase underpayments and erroneous negative case actions" (Center on Social Welfare Policy and Law, "Comments on Proposed Fiscal Sanction Regulations" [July 7, 1978], p. 6). These views were repeated in meetings with HEW officials, according to advocates involved in these discussions (interviews, 1981).

29 American Public Welfare Association, "Update on Quality Control Fiscal Sanctions Regulations" (memo W-1, January 15, 1980).

30 *Congressional Record*, H-5779, July 11, 1979.

31 For relevant discussions of goal displacement and performance measures, see, e.g., Malcolm Bush and Andrew C. Gordon, "Client Choice and Bureaucratic Accountability: Possibilities in a Social Welfare Bureaucracy," *Journal of Social Issues* 34, no. 4 (1978) 22-43.

32 Massachusetts Department of Public Welfare, memo to assistance payment staff (AP-ADM-80-5) (February 15, 1980).

33 106 CMR 303.120, 303.210.

34 Irene Lurie, "Legislative, Administrative, and Judicial Changes in the AFDC program, 1967-71," in U.S. Congress, Joint Economic Committee, Subcommittee on Fiscal Policy, *Issues in Welfare Administration: Intergovernmental Relationships*, paper no. 5, pt. 2 (Washington, D.C.: Government Printing Office, 1973), pp. 69-108.

35 Massachusetts Department of Public Welfare, memo on quality assurance (September 1979).

36 The regulations are 106 CMR 302.310, 106 CMR 302.311, 106 CMR 302.130, 106 CMR 301.530, and 106 CMR 302.340.

37 Michael Lipsky, *Street-Level Bureaucracy* (New York: Russell Sage Foundation, 1980).

38 Derthick (n. 11 above), Randall (n. 13 above).

39 However, we cannot determine what proportion of these cases involved only paper errors, such as missing Social Security numbers or other procedural deficiencies.

40 Jeffrey Protas, "The Cost of Free Services: Organizational Impediments to Access to Public Services," *Public Administration Review* 41, no. 5 (September-October 1981) 526-94.

41 Betsy Hecker and Teresa Nelson, "AFDC Fair Hearings: A Study of Administration in Process" (unpublished paper, Legal Services Institute, Jamaica Plain, Mass., May 1981).

42 At Roxbury Crossing, the second largest Boston welfare office, a significant proportion of cases were reinstated within one month of closing in 1980, as follows: January, 8 percent, February, 6 percent, March, 32 percent, April, 30 percent, May, 31 percent, June, 17 percent, July, 19 percent, August, 19 percent, September, 13 percent, October, 9 percent, November, 19 percent (Massachusetts Department of Public Welfare, January 21, 1981).

43. There were seventy-six reinstatements occurring within one day of closing in 1977, eighty-two in 1978, 105 in 1979, and 186 in 1980 (Massachusetts Department of Public Welfare, AFDC Recipient Master File, December 1980).

44 U.S. Department of Health, Education, and Welfare (January 15, 1979).

45 Massachusetts Department of Public Welfare (July 30, 1981).

46 U.S. Department of Health, Education, and Welfare (January 15, 1979).

47 The systematic restrictiveness of procedural changes implemented to lower quality control error are not systematically mitigated by either the fair-hearing process or by worker actions. Fair hearings, which must be initiated by the recipient, are sought by only a tiny fraction of claimants—less than 5 percent. Furthermore, the issues resolved in fair hearings have no precedent value, nor are they assembled by the DPW for use as a management indicator of problem areas. Worker actions to mediate the effect of stringent procedural rules are severely constrained by rules and department monitoring and enforcement mechanisms. However, workers will, on occasion, find back-door approaches to help selected clients, for example, by back dating case reinstatements. The extent to which this sort of behavior occurs is limited, not just by its cost to the worker, but also by worker perceptions of which clients are deserving of such help. In

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jobs such as that of the financial assistance worker, the deserving client tends to be the one who tries and eventually manages to comply with bureaucratic requirements, while others are regarded as troublesome (Richard McCleary, "On Becoming a Client," *Journal of Social Issues* 34, no. 4 [1978]: 57-75).

48. *Public Assistance Reporter* 1, no. 8 (May 1980): 1.

49. Murray Edelman, *Political Language* (New York: Academic Press, 1977), p. 3.

50. On rationing as an administrative strategy, see Lipsky (n. 37 above), and Protzas (n. 40 above).

51. In this respect, quality control resembles other management tools whose chief values are to be impressive to others and to minimize criticism (see Harvey Sapolsky, *The Polaris Missile System* [Cambridge, Mass.: Harvard University Press, 1972], and Aaron Wildavsky, *Speaking Truth to Power: The Art and Craft of Policy Analysis* [Boston: Little, Brown & Co., 1979]).

Ethics and Manipulation in Organizations

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This article discusses manipulation, identifies obstacles to the achievement of the objectives of a social service organization, and analyzes ethical issues inherent in the use of manipulation as a goal-achievement strategy

Manipulation

The acceptance, pursuit, and achievement of organizational goals requires the ability to influence the behavior of organizational members. This ability has been defined as a political skill. When this skill is used to control the activity of others without their knowledge or consent, it is called manipulation.¹ Manipulation is "... deliberate action on another person's field ... in order to secure a definite response, by controlling signals about rewards and deprivations, or by controlling rewards and deprivations themselves, or both."² Influence has been defined as manipulation when one who has a higher level of skill in persuasion uses it to further his own interests vis-à-vis a person less

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skilled in persuasion.³ In summary, manipulation is the conscious control of another's behavior, without his knowledge or consent, by the control of communications or activities that have meaning to the other person in order to achieve one's own objectives. It refers to administrative understanding and the use of relations that are capable of affecting operations. Some of our justifiable aversion to manipulation stems from its negative association with Machiavelli. His ideas about manipulation in political settings merit some attention.

Machiavelli stresses the importance of projecting apparent motives in distinction from actual motives. He indicates that one should always give the appearance of qualities such as mercy, faithfulness, humanity, and religiousness, but one should never be bound to act on these qualities when it is necessary for the protection of the state. He stresses that it is important to avoid being hated or contemptible, regardless of what one does, which suggests a thorough understanding of the values and norms of the group that one is influencing. Machiavelli concludes that the maintenance of the prince's state requires the use of manipulation.⁴ The concept "machievellian" has become a pejorative term that connotes the worst form of political manipulation. The concept is associated with principles of government in which political expediency is placed above morality, and unscrupulous cunning and deceit are used to carry out the policies of those who govern.

Machiavelli's principles and units of analysis are indirectly relevant to some types of social work practice. One can use his work as a heuristic device to derive organizational and managerial analogues for achieving sensitization to administration as politics. If anything, Machiavelli makes one vigilant in dealings with those who govern, but there are few models or practices worthy of emulation. On the other hand, there are some who suggest that his analysis has relevance to issues of influence in organizations.⁵

Aspects of Machiavelli's philosophy may be found in a study by Sayre, who asserts that a department head in the city of New York has to ". . . be a manipulator, or he will be an instrument in the hands of others and possibly pay high costs as a consequence."⁶ Perhaps the ease with which some can use manipulation is due to the fact that if used expertly, not only can one exercise control over events, but at the same time ". . . stimulate feelings of free choice and evoke enthusiasm and initiative"⁷ (thus avoiding being hated or held in contempt). One survey of community planners in the United States found that 77 percent were using some form of organizational manipulation to achieve their goals.⁸ The number of social workers who rely on manipulation is unknown. However, manipulation and other unobtrusive organizational change tactics have received much attention in recent years.⁹ Reports from practitioners reveal that they are uneasy about the ethical dilemmas and values conflicts inherent in the use of manipulation.

Ethical uncertainty surrounds the decision to manipulate. Although manipulation may not be ubiquitous, it is our impression that it is a tactic that is more common to practice than we care to admit.

Manipulation is a slippery word laden with negative meaning. The duplicity described by Machiavelli evokes outrage and grates upon our moral sense of decency. Yet, there are extenuating circumstances when elements of such conduct may be considered acceptable.¹⁰ Therefore, we need to examine closely, not what we would all reject as reprehensible, but those uncertain, less controversial organizational situations where we see good reasons to manipulate in the sense described at the outset.

Obstacles to Goal Achievement in Organizations

In the ideal organization, all persons work competently toward service objectives and have the resources to pursue them. Under such conditions, and aside from those who are acting from self-serving motives, there is little pressure to use manipulation because one can openly and rationally involve organizational members in activities essential to achieve common objectives. In reality this ideal situation does not occur, due to a number of organizational conditions including variation in staff competence and perception, disparity between demand and resources, goal displacement, and conflicts between organizational units.

The nature of staff mobility within an organization may interfere with goal achievement. Staff who are successful at one level of the organization are promoted to a higher level of responsibility, and this pattern continues until they reach their level of incompetence.¹¹ A corollary of this observation is that some of the positions in an organization are occupied by persons who are not competent to function at that level of the hierarchy. Thus, it is up to those who perform well to find ways to achieve the purposes of the organization and to compensate or override the malperformance of people in key positions. Under such conditions, the use of manipulation may become an issue.

Competition occurs among staff or organizational units for the limited resources of the organization. This situation creates an ethical problem because the acquisition of resources for one's clients, in keeping with the legitimate objectives of the organization, may result in limiting the resources to meet the needs of other clients. Nevertheless, the pressure produced by a practitioner's responsibility to a client may lead to reliance on manipulation to fulfill those obligations.

A third type of problem limiting organizational goal achievement is goal displacement. This can be viewed both in terms of the activities necessary to maintain the organization or the problems of specialized

units within the organization.¹² Organizations become preoccupied with specific day-to-day internal activities and lose sight of service objectives. Such activities as record keeping, budgeting and reporting, personnel management, and public relations displace activity essential to the achievement of organizational goals. Specialized units within organizations establish and pursue their own informal goals regardless of the formal goals of the organization. For example, the staff of an employment training program designed for hard-to-employ youth did not want the program to be viewed as a black program. Consequently, they tried to recruit qualified white applicants, even though there was a waiting list of qualified black applicants. When goal displacement occurs, both administrators and practitioners are faced with the task of influencing the behavior of persons in nonservice activities or in specialized units so that services may be provided to clients. The question is how such influence should be exercised.

A final problem of organizational goal achievement relates to potential conflicts of policy interpretation between legislators/boards of directors and executives, or between practitioners and administrators. Practitioners may desire to pursue the legitimate legislative purposes of the organization but find themselves thwarted by executive staff who are not sympathetic with specific social policies or legislative intent. From the practitioner's standpoint, lack of energetic enforcement or implementation may provide justification to resort to organizational maneuvering, including manipulation, to achieve the legislative or policy goals of the organization.

These, as well as other constraints upon organizational goal achievement, create pressure on those supportive of service goals to find a means to influence others to do likewise.

Ethical Consideration in the Use of Manipulation

The following perspectives are offered as a means of considering the ethical implications of manipulation. It is not possible to achieve closure on this subject in the space provided here. Thus, this section is organized as a series of stimuli to provoke further thought, discussion, and an examination of conscience. Our purpose is to explore the structure and limits of the demands our ethics make on us. Codes of ethics are recognized as ambiguous and problem laden because "... it is precisely when one tries to act on abstract ethical advice that the practicalities intrude, often rendering unethical the well-intended act."¹³ Codes of ethics are not necessarily complementary and may even make competing

or contradictory demands.¹⁴ One statement may appear to permit manipulation while another may appear to prohibit it. The charge to treat individuals with respect and dignity appears to limit manipulation; the charge to serve the client's best interests appears to permit it. Or, people who subscribe to different moral philosophies, each with their singular vision of how to assess right and wrong, make different moral judgments about the same act. For the consequentialist, "... it is ends not means which determine morality."¹⁵ "Yet, the opposing conception ... holds that how one achieves one's goals has a moral significance which is not subsumed in the importance and magnitude of the goals."¹⁶

Does this mean that our codes of ethics and moral systems are useless? Bok provides us with insights on their value: "They refine our moral perception and illuminate the intricacies of moral choice; they put a firm footing under our most indispensable moral judgments; and they help us make sense of human relationships, compare different levels of integrity, and shed light on models for how best to lead our lives or govern our societies."¹⁷ Bok's instructional point is that codes and moral systems are a point of departure, or heuristic devices to be used to weight ethical complexities, rather than a system of prioritized principles that lead to clear conclusions.

Fried, a moral philosopher, also provides illuminating perspectives on our ethical systems.

The demands of morality are inexorable, and our vocation for morality is the basis of our worth as persons. Yet these demands are not all-consuming—they leave room for discretion, for creativity. We are constrained but not smothered by morality once we recognize there are limits to our responsibility for the world's good and ill, that we are responsible for some things but not everything.¹⁸

If we use harming another person as the means to our ends, then we assert that another person may indeed be our means, while if we merely accept the risk that others will be harmed as we pursue our ends, and do not make that harm part of our projects, then it is still possible to assert that those others are not reduced to the status of means in our systems.¹⁹

Galper claims that our code of ethics is oriented toward individualism, but it should be collectively oriented. With a collective orientation, social workers would worry less about whether their change efforts are ethical. Ethics ought to transcend individual consideration and be oriented toward the greatest common good.²⁰

In addition to the theoretical difficulty in moving from abstract ethical codes to specific practical situations, most helping professionals work under tremendous time constraints that call for relatively rapid decision making if the service is to be of much value. It has been suggested that "... there is an ethics of action which is normally far more compelling than the urge to balance with precision the ethical

niceties of pressing public issues."²¹ At the same time, there is pressure on the person faced with such decisions to do more than simply ignore the ethical dilemmas.

Canon VII of the Code of Professional Responsibility of the American Bar Association states, "... a lawyer should represent a client zealously within the bounds of the law."²² The International Code of Ethics for the Professional Social Worker states that a social worker should "... sustain ultimate responsibility to the client ..."²³ These and other codes of professional ethics in the helping professions create an imperative of advocacy for the professional even though he or she works within an organizational framework. It is important to start with the perspective that the first responsibility is to the client and then consider the limits placed on the implementation of that responsibility. The term "imperative" is used with advocacy because the codes of ethics of the helping professions go beyond suggesting that one may simply "represent" a client, but mandate an active pursuit of those services sought by the client. This affirmative responsibility places the burden on justifying why the service objectives should not be sought if it is within the capability of the professional to secure them. This sharpens the ethical conflict especially where the securing of service sought by the client requires utilization of some type of manipulative technique.

The advocacy imperative of the helping professions is not without some limits, as it excludes activities that are known to be either illegal or fraudulent.²⁴ Short of that which is illegal or fraudulent, the attorney has responsibility to seek all lawful objectives reasonably available. The social worker is called upon, if frustrated by attempts to secure service through appropriate organizational channels, to initiate appeals to higher authorities, or even to go outside the organization to appeal to the wider community of interests.²⁵ Such approaches drawn directly from the codes of ethics appear to leave room for a number of manipulative techniques. Yet the question is not so much whether or not one should manipulate, but rather who should make the decision and according to what guidelines.

There is agreement among several writers as to the contingencies that justify the use of covert influence and the safeguards to prevent its use for shallow utilitarian purposes.²⁶ Covert means should be used only when the problem infringes on the needs and rights of clients or potential clients. Client welfare is the primary basis for action. Client self-determination is also a safeguard against inappropriate use of manipulation with active clients, but it is not always an alternative in class actions or in actions on behalf of potential clients. Under the latter circumstances, and when uncertainty surrounds the use of a covert tactic, the issues should be informally explored with confidants. In a different but relevant context, Bok goes further and recommends that people who hold differing views should be consulted to test the

merits of the tactics, and that eventually manipulation should face the test of some form of public scrutiny to see if it . . . would survive the appeal for justification among reasonable persons.²⁷ Finally, manipulation should be used only when conventional or formal mechanisms have been tried, or when previous organizational intransigence suggests that going through channels will be ineffective.

The following questions provide practitioners with a point of departure for further consideration of the inclination to engage in manipulation (1) Does the action affect individuals directly or indirectly? (2) Does the action affect a person, a policy, or both? (3) Does the action affect individuals, groups, or the organization in general?²⁸ (4) Does the action support the goals of the person(s) being manipulated? (5) Is the effect of the manipulation immediate or long range?²⁹ (6) Does the action clarify or confuse reality?³⁰ (7) Does the action control rewards or penalties? (8) Is the result of the manipulation reversible? (9) Can the action be defined as fraudulent? (10) Will the target of manipulation be harmed?

Conclusion

In thinking about the consequences of engaging in manipulation, it is not enough to examine each incident of manipulation in isolation, no matter how justified it may be. One also has to consider the aggregate consequences on the organization. If manipulation were to flourish and become a common social practice, it would erode the trust that we take for granted in our exchanges. In a manipulative world, persons become wary of overtures to cooperate and remain hypervigilant lest they be manipulated. Such cumulative deviance could very well lead to social disorganization—the inability to engage in collective action taking to solve problems and to carry out the functions of an organization.³¹ Thus, in the absence of extenuating circumstances and special considerations, manipulation should be avoided. If this principle is taken seriously, it will minimize indiscriminate use of manipulation. Manipulation may be occasionally necessary, but it may erode non-partisan, professional, open administration. Manipulation may be well intended, but it is an action that should be considered pardonable, not laudable.³²

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Notes

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1. See William D. Coplin and Michael K. O'Leary, *Everyman's Prince: A Guide to Understanding Your Political Problems* (North Scituate, Mass.: Duxbury Press, 1976), p.

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3, and Richard E. Walton and Donald P. Warwick, "The Ethics of Organizational Development," *Journal of Applied Behavioral Science* 9 (1973) 681-98

2. Robert A. Dahl and Charles E. Lindblom, *Politics, Economics and Welfare: Planning and Politico-Economic Systems Resolved into Basic Social Processes* (New York: Harper & Row, 1953), p. 104.

3. Herbert A. Simon, "The Nature of Authority," in *The Government of Association: Selections from the Behavioral Sciences*, ed. William A. Glaser and David L. Sills (Totowa, N.J.: Bedminster Press, 1966), p. 124.

4. Niccolò Machiavelli, *The Prince*, Great Books of the Western World, ed. Robert W. Hutchins (Chicago: Encyclopedia Britannica, 1952), p. 25.

5. Antony Jay, *Management and Machiavelli: An Inquiry into the Politics of Corporate Life* (Hinsdale, Ill.: Dryden Press, 1967), p. 5.

6. Wallace S. Sayre and Herbert Kaufman, *Governing New York City: Politics in the Metropolis* (New York: W. W. Norton & Co., and the Russell Sage Foundation, 1965), pp. 250-51.

7. Dahl and Lindblom, p. 94.

8. Martin L. Needleman and Carolyn Emerson Needleman, *Guerrillas in the Bureaucracy: The Community Planning Experiment in the United States* (New York: John Wiley & Sons, 1974), p. 158.

9. See Edward J. Pawlak, "Organizational Tinkering," *Social Work* 5 (1976) 376-80; Naomi Gottlieb, *The Welfare Bind* (New York: Columbia University Press, 1974); George Brager and Stephen Holloway, *Changing Human Service Organizations* (New York: Free Press, 1978), pp. 25-28; Herman Resnick and Rino Patti, *Change from Within: Humanizing Social Welfare Organizations* (Philadelphia: Temple University Press, 1980).

10. See Saul Alinsky, "Of Means and Ends," in *Strategies of Community Organization*, ed. Fred M. Cox et al. (Itasca, Ill.: F. E. Peacock Publishers, 1970), pp. 199-208, and Sissela Bok, *Lying: Moral Choice in Public and Private Life* (New York: Pantheon Books, 1978).

11. Laurence J. Peter and Raymond Hull, *The Peter Principle: Why Things Go Wrong* (New York: William Morrow & Co., Bantam Books, 1969), pp. 7-9.

12. Philip Selznick, "Inherent Tendencies of Bureaucracies," and Victor Thompson, "The Concept of Bureaucracy," in *The Government of Association: Selections from the Behavioral Sciences*, ed. William A. Glaser and David L. Sills (Totowa, N.J.: Bedminster Press, 1966), pp. 190, 110.

13. Monroe H. Freedman, "Professional Responsibility of the Criminal Defense Lawyer: The Three Hardest Questions," in *Modern Criminal Procedure*, ed. Livingston Hall and Yale Kamisar, 2d ed. (St. Paul, Minn.: West Publishing Co., 1966), p. 793.

14. Bok, pp. 52-56.

15. Charles Fried, *Right and Wrong* (Cambridge, Mass.: Harvard University Press, 1978), p. 8.

16. Ibid.

17. Bok, p. 53.

18. Fried, p. 1.

19. Ibid., p. 29.

20. Jeffrey Galper, *The Politics of Social Services* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1975), p. 33.

21. Stephen K. Bailey, "The Ethical Problems of an Elected Political Executive," in *Ethics and Bigness: Scientific, Academic, Religious, Political and Military*, ed. Harlan Cleveland and Harold D. Lasswell (New York: Harper & Bros., 1962), p. 22.

22. American Bar Association, "The Code of Professional Responsibility of the American Bar Association," in *Professional Responsibility: A Problem Approach*, ed. Norman Redlich (Boston: Little, Brown & Co., 1976), p. 298.

23. International Federation of Social Workers, *International Code of Ethics for the Professional Social Worker* (Geneva: International Federation of Social Workers, 1976), p. 3.

24. American Bar Association, pp. 311-12.

25. International Federation of Social Workers.

26. See Bok; Pawlak, Brager and Holloway; Ralph Nader, Peter J. Petkas, and Kate Blackwell, *Whistle-Blowing* (New York: Crossman Publishers, 1972).

27 Bok, pp. 73–106, esp p. 93

28 Edgar H. Schein, "The Problem of Moral Education for the Business Manager," in *Managing People at Work Readings in Personnel*, ed Dale S. Beach (New York: Macmillan Publishing Co., 1975), p. 469

29 Ibid

30 Dahl and Lindblom

31 Ibid

32 St. Augustine, as quoted by Bok; Bok is the stimulus and source for some of these conclusions (see Bok, pp. 31–60)

Reducing Bureaucratic Inflexibility

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It is generally believed that public welfare organizations are bureaucratic. This paper examines the literature dealing with bureaucratic phenomena, identifies the relevant variables, and develops a set of hypotheses. These hypotheses were tested in a set of eighteen public welfare agencies. The findings challenge the idea that large organizations are bureaucratic. They suggest that the size of an organization is not directly related to bureaucratic inflexibility and that large organizations may reduce bureaucratic inflexibility by promoting more professionalization, higher specialization, and reduction of influences of centralization.

Since Weber's formulation of bureaucracy, several rigorous attempts have been made to conceptualize the major characteristics of bureaucracy and establish relationships among them.¹ Of all the characteristics, rules and regulations appear to be the very essence of bureaucracy.² Several observations support the view that they lead to "bureaupathology."³ In service organizations, workers often have difficulty in providing needed services to their clients because of the inflexibility of organizational rules and regulations. This paper attempts to offer some alternatives to minimize bureaucratic inflexibility from an investigation of a set of public agencies.

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Previous Research

In order to suggest some explanation for bureaucratic inflexibility, an attempt will be made to identify those variables that generally are found to be associated with bureaucracy. The relationship among these variables will be reviewed to develop some theoretical propositions that can be empirically tested.

Studies of bureaucracy have frequently included organization size as one of the most important variables in their investigations. Generally, it is believed that larger organizations are more bureaucratic. The studies claim that as the organization grows in size, there is less direct personal contact among members, and informal methods of communication and coordination become inappropriate. Instead, formal patterns of interaction, routine procedures, rules and regulations, and evaluative mechanisms of performance are developed in the organization.¹ Furthermore, the size of an organization is related to decentralization because the larger the size, the more complex its goals and information become, hence precluding centralized decision making.⁵ In contrast to this, other studies have reported that the size of an organization is not related to the bureaucratic features of the organization.⁶ They argue that large organizations do not necessarily have to be impersonal and undemocratic, while smaller ones exhibit a more humanistic and democratic climate. They claim that organizations can use other modes of control besides rules and regulations.⁷

Another important variable that should be included in an explanation of bureaucratic inflexibility is the degree of professionalization in the organization. Human service organizations tend to rely on and employ professionals to implement their goals.⁸ Therefore, one way of reducing the number of written rules in bureaucratic organizations is to employ professionals who have internalized the relevant rules because of their formal education and training. These professionals, then, do not have to consult rules in many organizational situations.⁹ Hage and Aiken's¹⁰ study of health and welfare organizations provides support for this reasoning. The degree of professionalization is one indicator of "complexity" in their study, and it is negatively correlated with the degree of formalization.

Larger organizations in comparison to smaller ones have more resources. This enables them to employ a greater number of professionals to acquire prestige, political clout, and probably provide better quality of service. Most of the findings¹¹ indicate that larger organizations tend to encourage division of labor in terms of departments, units, and role specialization to promote efficiency. However, there are some¹² who claim that size and specialization are not even related. This contradiction might be related to the variations in technology used by the

organizations and the differences in their environmental conditions. It is speculated that, given a limited variation in technology and environmental conditions, size promotes role specialization in the organization. In addition, professionals, with their expertise and skills, also facilitate a high degree of role specialization.

Professionalization of the labor force effects the structure of the organization. Hall¹³ suggests that if the professional group is cohesive, its impact on the structure of the organization is stronger. An increase in professionalization is associated with a decrease in centralization of power in the organization. That is, much more authority will be vested in the lower-level members of the organization. Further, professionalization is associated with less formalization, fewer rules, less standardization, and job codification.¹⁴

Role specialization in the organization affects bureaucratic features of the organization. Hage¹⁵ found that in health and welfare organizations routine technology is associated with more centralization, whereas, Pugh's¹⁶ data indicated that the higher the routineness the lower the configuration of authority in the top levels of the organizations. Rothman¹⁷ points out in his review of their findings that centralization has two different meanings in these studies. While the former study emphasized the centralization of decision making about policy with the participation of the members of the organization, the latter one focuses on the dimension of work flow by the workers, within the limits of guidelines. Therefore, under certain circumstances, role specialization may lead to less influence of centralization on the actual work flow in the organization.

Generally, role specialization is considered to promote more bureaucratization in organizations.¹⁸ Because of occupational specialties and the resulting segmentation and fragmentation of jobs, organizations face difficulties in coordinating and regulating various activities. They may develop more rules and procedures to achieve the required coordination.

Most studies report that centralization is another dimension of bureaucracy. However, the findings about the relationship between centralization and the use of formal rules and regulations are inconclusive. Earlier findings suggested that with a high degree of centralization, the organization will use less rules to regulate the behaviors of their members. Recent studies argue that centralization and formalization are two different forms of control and can be used simultaneously by the same organization.¹⁹

Overall, the review of the literature indicates that organization size, professionalization, role specialization, and centralization are usually associated with the degree of bureaucracy in an organization. The findings about their relationships to bureaucracy, however, are inconsistent. This might be attributed to conceptual and operational problems and the samples of organizations included in the various studies.

Conceptual Framework and Hypothesis

On the basis of the evidence presented from the literature, organization size is considered the major independent variable in this study. Professionalization and role specialization are structural variables, while centralization and bureaucratic inflexibility are organizational process variables. It is postulated that organization size affects the structure of the organization, and it in turn affects the organizational processes, which also influence each other.

It is hypothesized that larger organizations tend to employ more professionals because of more available resources, prestige, and better quality of service. Organization size and professionalization encourage more specialization to achieve efficiency in organizations. Since role specialists desire autonomy and freedom in their work, role specialization will decrease the influence of centralization. With the decrease in centralization, members of the organization might be able to use more discretion and manipulate rules to decrease bureaucratic inflexibility in the organization. There are seven relational statements in this argument that can be elaborated for empirical testing. They are as follows: (1) As the size of the organization increases, the degree of professionalization increases. (2) As the degree of professionalization increases, the degree of specialization increases. (3) As the degree of task specialization increases, the centralization decreases. (4) As centralization decreases, the bureaucratic inflexibility decreases. Therefore, (5) as the size of the organization increases, the task specialization increases. (6) As the professionalization increases, the centralization decreases. (7) As the task specialization increases, the bureaucratic inflexibility increases.

Method

The data for this paper were collected as part of a larger study.²⁰ The organizations studied were a set of eighteen public family agencies in an eastern state. Generally, one agency covers one county of the state, but in the case of small counties, two counties were merged into the jurisdiction of one agency, and in the case of a major metropolitan area one agency only is responsible for that city. All these agencies were governed and directed, for all practical purposes, by the same central office, which has the same external control in terms of the recruitment of staff, budget, and policies.

These organizations resemble each other in their internal structure. They are homogeneous in terms of their mission, goals, objectives,

and functions. Their primary goal is to preserve and strengthen the basic family unit by providing a wide range of supportive and reinforcing services. Their areas of responsibility include adoption and foster-care placement, protective services for abused and neglected children, case-work, counseling and tangible services to families in their homes, day-care services, residential and institutional care, and supervision of juveniles in need of service. Their predominant function is "people processing," as they "relocate their clients in a new set of social circumstances."²¹ However, a minimum amount of therapeutic counseling is offered in some of the organizations, depending on the agency, the work, and the client group. By and large, they use a similar "technology" to deliver their services. Usually the direct-service workers are supposed to be in the field for several days each week.

Since it was difficult to get data from all members of all the organizations, a random sample of members was drawn from each organization. The executive director of each agency was interviewed separately. There were a total of 1,393 employees, with 565 selected as sample members. A total of 536 questionnaires was completed. Thus, the return rate of completed questionnaires was more than 96 percent.

In order to prepare the instrument of data collection, three organizations—one large, one of medium size, and one of small size—were chosen to gain familiarity with the functioning of the organization. Several interviews were conducted with various staff members at all levels in the hierarchy. The questionnaire was then developed for the variables used in this study.

Concepts and Measures

Size of the organization is defined as the number of individuals who are members of the system according to the rules of the system itself. In this study, they were the full-time paid employees of the organizations. There were only a few part-time employees in all the organizations; therefore, each part-time employee was counted as equivalent to one employee.

Professionalization is defined as the attainment of professional training through formal education. This was measured as the ratio of personnel who hold a master's degree to the total membership in each organization. Most of the people had their master's in social work, and a few had a master's in psychology or in one of the other related social sciences. This finding is rather weak conceptually, but can be considered as an objective measure of professionalization.

Role specialization is defined as the amount of differentiation of functions and activities that are expected to be performed as part of

Table 1

INTERCORRELATION OF MEASURES OF CENTRALIZATION

	(2)	(3)	Total Mean Score
1 Headquarters' influence on work . . .	.74	53	82
2 Regional supervisor's influence on work		65	89
3 Executive director's influence on work ..			87

NOTE.— $N = 18$; $r = .40$, $P < .05$, $r = .54$, $P < .01$, both one-tailed

the prescribed role of the organizational members. This was measured by the percent of time spent on different work activities carried out by each member. One activity done all of the time was scored as high specialization, while devoting time to a variety of activities was scored as low specialization.²²

Centralization is defined as the degree to which power is concentrated²³ in a member or a group of members of the upper echelon of the organization. This was determined by the response of the organization members to the influence of the top three levels of hierarchy on specific work. This measure was adapted from Patchen's measurement of influence²⁴ in the organization. Table 1 depicts the intercorrelation of measures of centralization.

Bureaucratic inflexibility is defined as the excessive use of rules and procedures and the members' ability to bend or mold them for the attainment of organizational goals. It is a departure from Thompson's observation that organizations develop "bureaupathological" behavior by depending excessively on rules and sanctions of the office. Bureaucratic inflexibility has been operationalized as an index of these variables. First, the rules observation was measured on items such as worker performance, casework decisions, policy implementation, meeting monthly client-visit requirements, and submitting reports. Second, supervisor approval was measured on items such as decision about a case, report on a case, work plans, and use of agency facilities. Third, ability to manipulate rules and regulations was measured by asking a global question. Table 2 depicts the intercorrelation of measures of bureaucratic inflexibility.

Data Analysis

Data were obtained from the responses of sampled individual members from each organization in order to compare their organizational properties. An organizational score was calculated for each of the variables.

Table 2

INTERCORRELATION OF MEASURES OF BUREAUCRATIC INFLEXIBILITY

	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	Total Mean Score
1 Rules observed on worker performance evaluation . . .	62	50	.46	42	49	.55	19	29	.56	74
2 Rules observed on meeting MVR . . .		64	59	44	46	.65	48	37	.45	85
3 Rules observed on policy implementation . . .			63	71	43	.44	34	34	.41	76
4 Rules observed on submitting reports . . .				44	.26	.34	39	58	.15	71
5 Rules observed on making case decisions . . .					49	.54	35	43	.07	68
6 Approval by supervisor on case decision . . .						.79	34	58	.33	73
7 Approval by supervisor on case report . . .							.36	49	.36	79
8 Approval by supervisor on work plans . . .								45	.11	59
9 Approval by supervisor in using agency facilities . . .									.23	65
10 Extent to manipulate rules . . .										.40

NOTE.— $N = 18$, $r = .40$, $P < .05$, $r = .54$, $P < .01$, both one-tailed

The procedures used in this study are similar to other survey studies²⁵ of organizations. This required aggregation of individual scores into organizational scores is based on two assumptions: first, that the total mean score of individual members' responses is the best measure of the organization unit as a whole, and, second, that the sample of members selected for interview is representative of the whole organizational unit. In order to build up a scale for each variable, a mean score was first computed for each of the items by summing the scores for the individuals within the organizational units and then dividing that by the number of respondents in each of the respective units. A summary score was then computed for each variable by calculating the average of the scores on all the items in that variable.

In order to test the hypothesis, the principal statistical technique used in this study was the Pearson product-moment correlation. In addition to bivariate correlation analysis, partial correlation is used to introduce control variables. Finally, a technique developed by Simon for making causal inferences from correlational data in the general multivariate case, and demonstrated by Blalock²⁶ in the case of a five-variable model, was applied to compute prediction equations by using zero-order correlations to test the adequacy of the model.

Findings

On the basis of the hypothesized relationships among the variables in question, a model is proposed to reduce the bureaucratic inflexibility in an organization (see fig. 1). In this model, organization size is con-

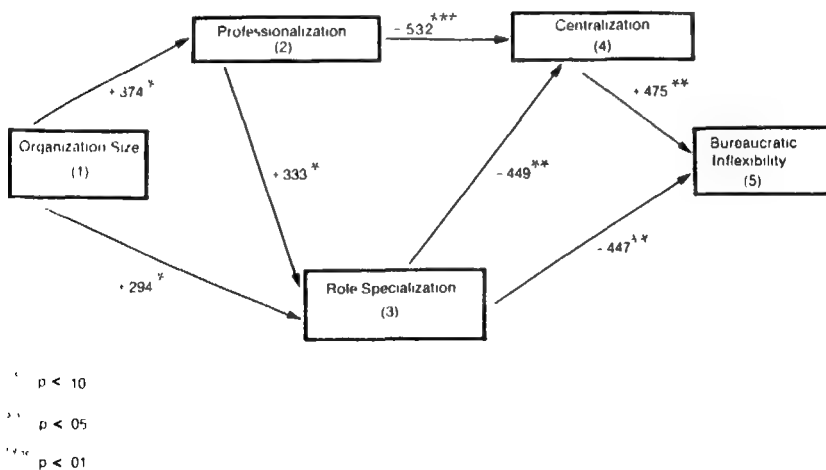


FIG. 1 —A model to reduce bureaucratic inflexibility

sidered the major exogenous variable. It is assumed that, other things being equal, the size of the organization generates certain structural characteristics in the organization. Further, it is assumed that the structures of professionalization and role specialization affect the bureaucratic feature of organizations. The results from the investigation were used to examine this mode.

As hypothesized, organization size is positively correlated with both professionalization ($r = +.374, P < .1$) and role specialization ($r = +.294, P < .1$), and professionalization and role specialization are also positively correlated ($r = +.333, P < .1$) with each other. The zero-order correlations among these variables are in the hypothesized direction, but weaker in magnitude than expected. Professionalization is negatively correlated ($r = -.532, P < .01$) with centralization. Role specialization is negatively correlated with both centralization ($r = -.449, P < .05$) and bureaucratic inflexibility ($r = -.447, P < .05$), and centralization is positively correlated ($r = +.475, P < .05$) with bureaucratic inflexibility. It was found that most of the zero-order correlations between each pair of variables are in the hypothesized direction except the relationship between role specialization and bureaucratic inflexibility. The magnitude of their relationship ranged from weak to strong. Overall, the magnitude of the correlations seems reasonable for each pair of variables.

Since professionalization, role specialization, and organization size were positively intercorrelated, the first-order partial correlation coefficient was computed between organization size and role specialization while controlling for professionalization. As professionalization was controlled, the correlation between size of the organization and role specialization ($r = +.294, P < .2$) was reduced to a negligible level. Professionalization, role specialization, and centralization were also intercorrelated. Another first-order partial correlation coefficient was calculated between professionalization and centralization while controlling for role specialization. The correlation coefficient between professionalization and centralization ($r = -.454, P < .05$) was also reduced slightly but continued to show a negative association between these variables after controlling the effect of role specialization. Role specialization, centralization, and bureaucratic inflexibility were intercorrelated. Again, a first-order partial correlation coefficient was computed between role specialization and bureaucratic inflexibility while controlling for centralization. After instituting control for centralization, the correlation coefficient between role specialization and bureaucratic inflexibility was reduced (from $r = -.447, P < .05$, to $r = -.198, P < .1$). The reduction in magnitude of the correlation coefficient between a pair of variables by computing a first-order partial is an indication of an indirect or mediating relationship between the variables in question. This indicates that professionalization may be

Table 3

ZERO-ORDER CORRELATIONS AMONG FIVE ORGANIZATIONAL PROPERTIES

	Organizational Properties	Role			Bureaucratic Inflexibility
		Professionalization	Specialization	Centralization	
1	Organization size	+ .374*	+ .294*	-.089	- .117
2	Professionalization		+ .333*	-.532***	- .235
3	Role specialization			-.449**	- .447**
4	Centralization				+ .475**
5	Bureaucratic inflexibility				+ .100

NOTE —N' = 18, df = 16

* $P < .10$

** $P < .05$

*** $P < .01$

Table 4

PREDICTIONS AND DEGREE OF FIT FOR THE MODEL: REDUCING BUREAUCRATIC INFLEXIBILITY

Predictions	Degree of Fit
$r_{14} = r_{13r14}..$	$-.089$ vs. $-.132 = (+294) (-449)$
$r_{25} = r_{24r45}$	$-.235$ vs. $-.253 = (-532) (+475)$
$r_{15} = r_{13r35}$	$-.117$ vs. $-.131 = (+294) (-447)$

an intervening variable between size and role specialization, and that the relationship between professionalization and centralization may be mediated by role specialization. Moreover, the association between role specialization and bureaucratic inflexibility is also mediated by centralization. The sequential order of the variables in this model is clearly supported by the data (see table 3).

The model reported earlier consists of five organizational variables. There could be a total of ten one-way arrows connecting these variables but the results of only seven connecting arrows were present in the model. The remaining three—the correlation coefficient between organization size and centralization ($r = -.089$), between organization size and bureaucratic inflexibility ($r = -.117$), and between professionalization and bureaucratic inflexibility ($r = -.235$)—are not high enough to be significant. For this reason the arrows between these variables are not included in the model. It suggests, therefore, that the size of the organization is not directly related to centralization and bureaucratic inflexibility. However, it may be indirectly related to these two variables. Professionalization, likewise, is not directly associated with bureaucratic inflexibility, but may be indirectly related (see table 4).

Finally, prediction equations were computed to determine the degree of fit of the model. For the prediction equation (r_{14}), we get an actual value of $-.089$ versus an expected value of $-.132$. For (r_{25}), the actual value is $-.235$, in comparison to the expected value of $-.253$. For (r_{15}), we found an actual value of $-.117$ and an expected value of $-.131$. The numerical values of all three prediction equations are reasonably close. In other words, the relatively low numerical values of these prediction equations indicates that there is no direct relationship between the size of the organization to centralization and bureaucratic inflexibility. The data also do not show a direct association between professionalization and bureaucratic inflexibility.

Discussion

The data presented here provide considerable support for the model to reduce bureaucratic inflexibility in service organizations. Organization

size is positively associated with professionalization and role specialization, and professionalization and role specialization are positively associated with each other. This suggests that the larger organizations tend to employ more professionals, even though they might be expensive; and professionals, because of their training, skills, and expertise, encourage role specialization in the organizations. It is interesting to note that Weber's theory also included role specialization (an indicator of division of labor) as one of the major characteristics of bureaucracy. It appears that professionalization enhances role specialization in the organizations. Professionals in the bureaucracies tend to adopt the pattern of role specialization because of a certain degree of compatibility between their professional norms and the norms of the organizations. Role specialization may be the joint result of a compromise between the professional norms and the management principles of the organization. It should be noted that these findings are not strong; they are only suggestive of this reasoning.

The relationship between the size of the organization and role specialization is consistent with the findings of the Aston Group²⁷ and Blau and his associates,²⁸ given their indicators, but it is not in agreement with Hage and Aiken's²⁹ result for the relationship between organization size and complexity. This might be attributed to the fact that the organizations studied by Hage and Aiken are not a "set" of organizations. In their sample of sixteen organizations, some of them were hospitals, while some were family agencies or residential treatment centers for emotionally disturbed and mentally retarded children. It is quite obvious that there is an appreciable difference in the "technology" used by these organizations to work with their clientele. In our data, however, there is minimal variation in the technology used by organizations, since all the organizations are predominantly "people-processing" organizations. The differences in environmental conditions are also minimal, except in the variation in the structure of their mandated communities. It seems reasonable to argue that, given the limited variation in technology used by the organizations and their environmental conditions, organizations promote role specialization if there is an adequate amount of professionalization in the organization.

The association between increased professionalization and decreased centralization is consistent with earlier findings.⁴⁰ Professionals desire autonomy, value expertise, and often identify with the norms of their professional association. Usually, they prefer to work according to their training and internalized professional norms, and they increasingly depend on interpersonal mechanisms of feedback and coordination. They therefore tend to minimize the interference of influence from a higher-level bureaucratic authority, and work-related decisions are decentralized.

It was found that role specialization reduced the influence of centralization and bureaucratic inflexibility. The relationship between role

specialization and centralization confirms Rothman's³¹ conjecture that the influence of centralization on specific work-flow activities will decrease with a high degree of role specialization in the organization. The relationship between role specialization and bureaucratic inflexibility observed in this study challenges many earlier findings.³² Previous studies indicated that role specialization engenders bureaucratic inflexibility in the organization, whereas these data suggest that it reduces bureaucratic inflexibility. Role specialization provides opportunities for employees to perform a rather limited set of work activities apart from the overall goal of the organization. Workers learn to handle many situations that are not prespecified and develop expertise and confidence by getting feedback about their work. There is no way that rules can be written for every specific work-related activity. In specialized job situations, informal rules³³ are developed to provide the needed service to the clients, and workers do not need to consult the manual and seek the permission of their supervisors all the time. The relationship between role specialization and bureaucratic inflexibility could also be explained in terms of some specific attributes of the organizations studied. Since these are people-processing organizations, there is a heavy emphasis on efficiency³⁴ measured in terms of quantity of clients processed in a given period of time. This suggests that bureaucratic inflexibility may be reduced with increased role specialization because of the expertise of those performing the roles as well as the creation of informal rules and emphasis on efficiency in the organizations.

Generally, centralization and bureaucratic inflexibility are considered two different dimensions of bureaucracy. The studies from industry and business organizations report that they are two different kinds of control. They suggest that if there were more centralized forms of control, there would be less reliance on rules and regulations. The data from welfare organizations³⁵ indicate that these two forms of control can go hand in hand in the same organizations. Similar to other studies of welfare organizations, these data reveal that the numbers of higher echelons that are at a distance from the actual work-flow processes would tend to depend on impersonal mechanisms such as rules and regulations and the use of line supervisors to approve the actions of the work force. This is how centralization in the work process reinforces bureaucratic inflexibility in the system.

In summary, the larger organizations can afford to have more professionalization, which tends to generate more role specialization while reducing centralization. As centralization decreases, the bureaucratic inflexibility in the system decreases. Thus, larger organizations may develop two important structural features—professionalization and role specialization—and these in turn may reduce bureaucratic inflexibility through reducing centralization in the organizations.

This investigation offered some suggestions for reducing the bureaucratic inflexibility in public welfare organizations. However, it

should be noted that this study reported data from a set of only eighteen predominantly people-processing organizations. In order to achieve a fuller understanding of this phenomenon, future research might include a large sample of varied organizations with differences in environmental conditions, technologies, professionalization, and complexity.

Notes

I am indebted to Dr. Bernard P. Indik, Professor, Graduate School of Social Work, Rutgers University, for his comments on the draft of this paper.

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Organizations and Values in Human Services

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A congruence framework, emphasizing person-environment fit, is utilized to examine selected dimensions of staff members' values and agency characteristics of structure and technology. Drawing from the fields of ethics and organizational theory, this article explores the interactions of individual staff, work group, and organizational levels of service delivery, with particular attention to their respective emphases on means versus ends of action and internal versus external sources of authority. It is suggested that congruence of values with organizational characteristics enhances workers' satisfaction and effectiveness. Implications are drawn for theory development, research, and practice.

Efforts to improve the quality of human services should proceed from a clear understanding of the complex processes characteristic of such programs. As organized, coordinated efforts to apply treatment technologies to vulnerable populations via service staff, human service programs share a number of common features. These include an authority structure regulating their activities, methods or technologies of treatment, and staff attitudes and values. While organizational characteristics and individual values are often treated independently in considerations of human services, we maintain that both domains converge in the delivery of services, and this convergence must be taken into account in understanding such programs. In the following pages, we offer a general congruence framework that may be employed toward this end and identify program dimensions along which congruence is vital to effective service delivery.

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Shared Characteristics of Service-Delivery Programs

Despite a long tradition of emphasizing that human behavior can best be understood in the context of the social environment, professionals in the human services have not often reflected such a perspective in studies of their own service-delivery activities. Such services encompass a wide variety of social problems, clients, treatments, goals, and organizational patterns. Each of these domains has been the object of considerable theorizing and research aimed at improving our understanding of services and their effective delivery. However, many such efforts have suffered from the tendency to focus on only a single component of the program in question as an influence on outcomes. While it seems apparent that the interaction of these components is crucial to the effective delivery of services, the development of theory and research has tended to treat them separately and has not given sufficient attention to linking dimensions for conceptualizing and studying the relationships among program components.

Human service-delivery systems have a number of shared characteristics. First, most have as an ultimate outcome some change in clients' behavior, skills, or attitudes. Second, they employ staff who are the instruments of such change. Third, those staff members must deal with complex technical and ethical problems in their treatment activities. Fourth, staff do not work as autonomous professionals but rather work together with others to provide services. Finally, the treatment takes place in or is initiated by a formal organization. Such characteristics suggest that, regardless of the specific clients served or problems addressed, three aspects or levels of the delivery system should be considered in any research effort: the individual staff member, the work group, and the organization.

Yet another inference can be drawn from this list of common characteristics: the effectiveness of service delivery depends on the values of the staff, the treatment technologies utilized, and the coordinated functioning of staff in the organization. Congruence among staff, co-workers, and administration is crucial for achieving desired outcomes.¹ Therefore, it is necessary not only to examine multiple components and levels within an organization but also to consider them simultaneously and to explore the congruence among them on dimensions crucial to service delivery.

With this in mind, the task remains of identifying those characteristics that are of importance at each of the organizational levels and the

relevant dimensions that can be used to assess congruence across levels. Toward that end, it is again useful to look for features of staff and formal organizations that are characteristic of human service systems in general rather than to emphasize unique aspects of each particular program.

A service organization engages in treatment activities that are coordinated with reference to a particular goal and implemented by staff. The formal organization defines the acceptable interventions or treatments to be employed and the form and extent of coordination to be followed in the delivery of these services. Thus, within any human service system, two crucial characteristics at the organizational level are treatment technology and authority structure.

A characteristic common to staff in human service organizations is that they serve as the implementers of treatment technology with clients. However, given the relative lack of specificity inherent in many social services, such staff members daily face mazes of decisions, choices, and obligations. They are expected to deal with people who, for whatever reason, have difficulties in functioning in the community and who are often extremely vulnerable and dependent.² With these clients, staff are expected to be supportive, insightful, protective, helpful, controlling when necessary, and highly ethical in all their judgments and actions. Other than legislation regarding the civil rights of some specific client groups, there are few explicit moral principles or sources of guidance for staff behavior in such circumstances. Rather, values and principles tend to be seen as vague, rhetorical, and often impractical. Staff often confront ambiguous situations where principles are difficult to apply and a great deal of discretion must be employed. Thus, it appears that a crucial characteristic to be assessed at both the individual staff and the work group levels would be the form and emphasis of the ethical orientation of the staff and the degree to which decisions are guided by a shared and unified ethical position.

We have yet to identify the specific dimensions along which such seemingly disparate characteristics as staff ethical positions, organizational structure, and technology can be compared to assess the congruence that is suggested as being crucial for service delivery. Toward that end, we first examine the congruence perspective that will be employed throughout the remainder of this paper. Then we consider some ethical aspects of decision making in human service programs. Subsequently, we examine in more detail the organizational characteristics of structure and treatment technology. The identification and development of parallel dimensions for linking these domains is then described, and implications are drawn regarding the effective delivery of services.

The Congruence Perspective

The concept of congruence is a particularly useful perspective for jointly describing the relationship between the characteristics of an individual and the characteristics of a particular setting. Vital to this approach is the examination of the interaction or pairing between environmental demands and resources and the individual's needs, interests, and capabilities. Optimal fit occurs when the demands made by the environment are consistent with the individual's resources or capacities and when his needs can be met by the resources in his environment. Discrepancies between demands and resources in either the individual or the environment have been found to contribute to maladaptive behavior and ineffective performance.³

The relationships between individuals and their environments have been studied in a variety of contexts, from neighborhoods to assembly lines to college campuses. Much of this research has focused on the impacts of physical and social environments on human beings and the processes by which individuals establish and maintain a mutual "fit" with their environmental settings through adaptation.⁴ Behavior from this perspective is not viewed as being either pathological or healthy. Rather, it is defined as transactional, an outcome of reciprocal interaction between specific social situations and the individual.⁵ Becoming ill, for example, has been shown to be one way in which people can adapt to their social environment.⁶ Indeed, studies have shown prolonged and recurrent maladaptation to the social environment to be related to various illnesses, including mental disorders.⁷

Person-environment congruence has also been studied in various treatment contexts. Visotsky et al. indicated that patients may vary their responses widely according to perceived differences in the kinds of behavior exhibited by therapeutic personnel.⁸ Fitch found that the congruence of individuals' needs or expectations with their living environments was directly associated with the success of residential care.⁹ Homogeneity of people's expectations, particularly when those expectations are closely matched by available resources in their environment, would appear to reinforce the positive consequences of fit for their functioning.

The congruence approach was applied to the internal work environment of organizations by Lorsch and Morse.¹⁰ They assessed the interactions among numerous characteristics of workers and their job environments. These characteristics included clarity of job requirements, need for conformity, feedback on performance, frequency of unanticipated circumstances, task complexity, tolerance for ambiguity, formal and informal structure, conflict resolution, and goal and time orientations. The extent of congruence between individual and organizational

characteristics was found to be systematically related to employees' performance ratings and their sense of competence. House and Hanison both found that such congruence was closely associated with job satisfaction.¹¹ Ingham and Miner both confirmed that individuals' responses to similar work conditions may differ dramatically.¹² Settings or characteristics that are comfortable and satisfying for one person may be stressful and problematic for another.

A growing number of researchers has concluded that person-environment interaction is more important than either individual differences or environmental characteristics in explaining behavioral variation.¹³ This is nowhere more evident than in the context of work. People who make informed choices about their jobs in relation to their own needs and preferences have been found to have higher satisfaction and lower turnover rates than others who did not make such judgments.¹⁴ Given the importance of staff job satisfaction and tenure for effective service delivery, a framework for studying human service programs should take into account both the individual worker and the organizational context of the job environment, as well as the interaction or congruence between the two.

In order to examine the interaction of organizational characteristics and staff values, it is first necessary to identify the relevant dimensions of each area for analysis. Let us first specify some aspects of ethics that are important in service delivery and then derive a comparable set from the organizational domain.

Ethics and Decision Making

As we turn to examine the ethical aspects of service delivery, it quickly becomes apparent that there are no absolute rights and wrongs that have been identified and given universal consent. However, there are a variety of assumptions, principles, approaches, and modes of reasoning that have been discovered through historical experience to be useful in struggling with ethical problems. Not all judgments can be termed ethical decisions. In making an ethical decision, the attitude of the individual should be (a) impartial, (b) informed, (c) the consequence of a "normal" state of mind (not characterized primarily by illness, insanity, fatigue, anger, grief), and (d) compatible with a system of consistent principles.¹⁵ In other words, an individual believes that a certain principle is appropriate to employ in a given case situation, that it could apply to every case of this kind, that it is compatible with other principles he or she accepts, and that it is supported by more general and valid ethical assumptions.

Ethical reasoning need not, however, be inflexible. Exceptions can be made to general principles so long as they are made carefully according to certain basic rules for ethical decision making. Analysis of exceptional situations is conducted through taking what is called by ethicists the "moral point of view"—the mental perspective used to develop principles as well as to assess an individual's actual duty in a situation where principles conflict.¹⁶ During the analysis of exceptional situations, the individual should seek to be free and reasonably impartial, to be willing to universalize and act on principle, and to be informed about relevant facts that will aid in understanding the situation. A decision under conflicted or ambiguous circumstances would be justified as being ethical if others who are also taking the moral point of view believe, after reflection on the situation and the decision, that it is valid. Such a process embodies the notion of the ideal consensus. However, if there is disagreement about the conclusions, further reflection by all is necessary, for there is no ultimate proof of moral judgments any more than there is of scientific theories.¹⁷

Examination of the history of mankind's attempts to develop ways of dealing with ethical problems reveals several major perspectives or schools of thought. Among the most extensively developed of these is utilitarianism, a perspective based on the ethical principle that "an act is right if and only if there is no other act the agent could have done instead that has higher utility than it has," where "utility" refers to the net gain of benefits over costs that occurs as a consequence of a choice.¹⁸ Originally developed by Jeremy Bentham and John Stuart Mill,¹⁹ this perspective defines the good in terms of pleasure and pain. Individuals are less important than are benefits resulting across the total society.

Basing obligations on their consequences is considered a teleological form of ethics, of which utilitarianism is a major form. A diametrically opposed perspective is called deontology, which asserts that right and wrong are not determined by assessment of consequences but by virtue of some prior moral principles or qualities inherent in the act or situation.²⁰ What is right may not necessarily contribute to benefits. For example, we may believe it is right to keep our promises even if no discernible results are seen. While producing good consequences is a consideration, that aspect alone does not determine an individual's duty. Rather, the emphasis is on moral obligations and means of implementing one's duties, including promises, gratitude, justice, beneficence, self-improvement, nonmalevolence, and such.²¹ An example of a deontological perspective in the social work literature is the recent work of Reamer,²² who utilizes Gewirth's principle of generic consistency as the rational basis for the moral values of freedom and well-being.²³ Actions are seen to be morally right if they meet the criteria of not violating another's freedom; not interfering with their basic necessities

such as life, health, food, or shelter; and serve to enhance their abilities to achieve their life purposes.

Setting up a hierarchy of principles to handle conflicts of duties has not provided foolproof solutions to moral dilemmas. Teleologists are confronted with the complexities of determining which principles and alternatives do produce the most benefits and which "goods" (knowledge, pleasure, self-actualization) may be better than others. Deontologists must rely on either intuitive or logical weighing of principles to inform them about the extent of stringency of various duties. The struggles with such difficulties have led to the development of a variety of other schools of thought.

Ethical egoism is a form of teleological thought that emphasizes that each individual should seek his own good, regardless of others' interests. The vehement iconoclasm of Nietzsche emphasized the individual will as the source of all values and the ruthless pursuit of one's own ends or goals as the proper focus of choices and action.²¹ This general position has been developed in modern times by Hospers²⁵ and by Rand,²⁶ who preferred the label "objectivism" for this perspective emphasizing the strong individualist pursuing his own ends.

Perhaps the greatest contrast with such a position would be the group and means-oriented perspective that moral choice can only be meaningfully grounded in the dutiful expression of the norms and procedures and traditions of one's society.²⁷ Such a perspective has been labeled "social idealism" due to its emphasis on social bases for ethical choice.

Emphasizing the individual but standing in an intermediate position between a focus on means versus ends are intuitivists, such as Ewing,²⁸ who generally hold that the individual will know subjectively how he or she is to decide in each situation, without reference to fixed rules or set objectives. Likewise, the cultural relativism of Sumner emphasizes the social origins of all ethical notions, whether they relate to means of behavior or appropriate ends of choice.²⁹

In order to compare and contrast these various perspectives, two key dimensions of ethical judgments may be drawn out for examination: the source of principles and the objective or focus of choices. The dimension of the source for ethics refers to the basis, origins, or grounds from which decision-making principles arise. There are many such sources for guiding moral choices, ranging from internal, individual conscience and religious beliefs to external norms, mores, or rules of one's society. Kohlberg, for example, proposes that moral development proceeds through a series of stages by which the individual moves from an early emphasis on compliance with external enforcements to an incorporation of norms and finally to a realization of his own internal moral responsibilities.³⁰

Distinct from this dimension is that of the focus of ethical choices—

those aspects of the content or the situation considered and emphasized in decisions. One may focus on the scrupulous implementation of prior moral principles or norms, regardless of the results of such applications, as emphasized by Kant and other deontological ethicists. Alternatively, one may concentrate on the ends or results sought, with less attention to means, as emphasized by utilitarian principles.

These two dimensions may be conceptualized as continua, with the polar extremes of the source dimension represented by internal and external bases and the extremes of the focus dimension being means and ends. Obviously, there are mixed positions at intermediate points along either dimension. Crossing the two dimensions allows for the comparison of individuals' locations on both aspects simultaneously. Various regions of such a bidimensional grid may be labeled to represent major ethical perspectives, as illustrated in figure 1.

While such schools of thought may be abstractly distinguished, their applications in concrete situations are not always straightforward. Few of us make our ethical decisions explicitly on the basis of a single ethical principle or perspective. Rather, most people draw on a variety of notions, preferences, traditions, and habits. In fact, there is a great deal of confusion and disagreement among human service staff regarding which ethical principles are relevant to treatment and how they are best applied.³¹ Buffeted about in those debates are such issues as client self-determination, the appropriate uses of power and authority, accountability, the needs of the individual versus those of the community, authenticity, confidentiality, patient rights, and independence.

Furthermore, our society is generally characterized by a mistrust of authority, traditional values, and rules. There is an emphasis on self-realization through the flexible pursuit of one's own interests. The primary function of ethical principles—the provision of a guide for making choices in problem situations—is neither widely recognized nor accepted as being important. This diversity of opinion has led to a relaxed acceptance of the holding of almost any opinion without either rationale or consistency. Such ethical ambiguities can create considerable problems for individuals working in complex situations

Internal to individual	Deontologism (Kant, Ross)	Egoism (Nietzsche, Hospers)
SOURCE of values		
External in society	Social Idealism (Bradley)	Utilitarianism (Bentham, Mill)
	Means	FOCUS of choices
		Ends

FIG. 1—Some key ethical perspectives relating dimensions of source and focus.

such as human service programs. Existing guidelines for resolving conflicts and suggesting actions in problematic situations may be inadequate to sustain a meaningful and effective program. The consequences can show up in aggravated client problems, dissatisfied staff, and ineffective programs.

Structure and Technology in Human Service Organizations

As discussed earlier, human service organizations attempt to coordinate the activities of a variety of persons and bring them together in ways effective for solving problems. The needs, interests, and expectations of staff as well as clients vary widely. The multiplicity of influences on service delivery must be confronted by the organization and mechanisms of task allocation and coordination sustained. While there are numerous characteristics of organizational design and management relevant to such considerations, let us examine but two: structural centralization and treatment technology.

Structure was defined by Thompson as the internal differentiation and patterning of relationships by which the organization sets limits and boundaries for performance by delimiting responsibilities, control over resources, and other matters.³² Organizational structure represents the administrative mechanisms developed to balance the differentiation resulting from specialization of work roles with the necessary integration and coordination in order that tasks get done. Among the most important aspects of structure is centralization—a combination of the locus and distribution of decision-making authority in an organization. Concentration of power in the top administration reflects a highly centralized organization. The higher the proportion of staff who participate in decisions and the greater the number of decision areas in which they are involved, the more decentralized is the organization.

The tasks involved in carrying out an organization's purposes are its technology. Perrow defined technology as "the actions that an individual performs upon an object, with or without the aid of tools or mechanical devices, in order to make some change in that object. The object or 'raw material' may be a living being, human or otherwise, a symbol, or an inanimate object."³³ This perspective on the work of an organization involves several components: the variability or routineness of the tasks, the predictability of the search process when exceptions occur, and the uniformity or variability of the "raw material" worked with. Where the tasks are routine and predictable and raw material

is uniform, the potential rises for greater standardization of tasks. Alternatively, highly variable tasks, unpredictable search procedures, and dissimilar materials decrease such potentials for standardization.

Organizational structure and technology interact in human service organizations. In fact, among the basic organizational implications of congruence theory is that the structure of programs must be appropriate to the nature of the tasks to be accomplished.³⁴ Research on human service organizations has shown that they typically face highly varied client needs. Modern, as opposed to traditional, human service programs may be characterized by particularly high variability and frequent exceptions in the work procedures. Clients are seen as individuals whose distinctive characteristics are more important to the treatment tasks than are their similarities. The technology is "customized," and the selection of techniques, their combination, ordering, and change, are determined by feedback from the client. Therefore, the information most useful for decision making is likely to be in the hands of those who interact more extensively with clients. Under such circumstances, the most effective programs are characterized by lateral communication, co-worker interdependence, and more decentralized administrative structures.³⁵ In other words, where work is less routine, performance expectations cannot be specified closely, and individuals must make sensitive judgments about their work, one is more likely to find more flexible, less hierarchical, more decentralized structure. Higher levels of centralization are found in organizations where work is routine, not particularly difficult or complex or variable, and where staff are not dependent upon one another to complete their tasks. When mismatches occur, the consequences are seen in decreased performance, satisfaction, and effectiveness.³⁶

These interacting characteristics of organizational structure and work technology are diagramed in figure 2. For purposes of illustration, the relationships are grounded in recent trends in residential mental health programs. Traditionally, the emphasis of such facilities was on custodial care of patients. The individual was delivered to a "state home" to be cared for until death. There was little expectation of resident development or training for independence. A transitional period occurred as many institutions moved from the custodial model toward the newer treatment-placement plan. In the newer approach, there is an increased expectation that the client can be trained, educated, or at least aided in development toward a greater degree of independence. Individualized placement in local community facilities, rather than retention in the institution, is strongly emphasized. The shift from one kind of emphasis to another brought associated changes in jobs and in the management and supervisory system.

In the traditional custodial care approach, the institution operated with a highly centralized administrative structure and with a work

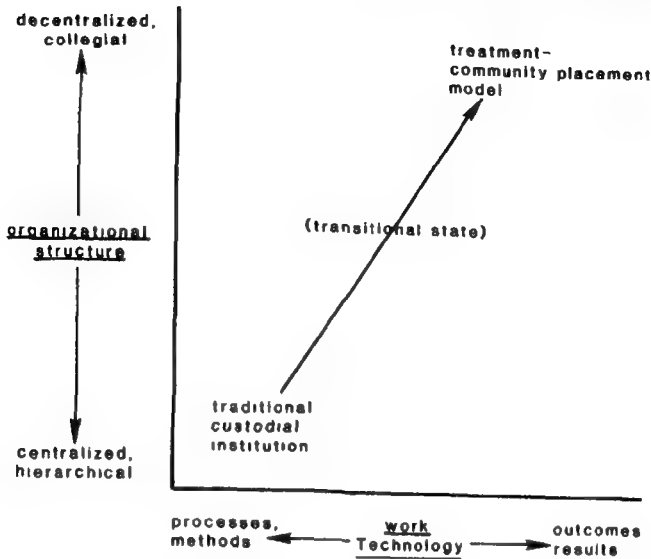


FIG 2—Comparing mental health service models on dimensions of structure and technology

technology characterized by standardized (process or large batch) service. Routine and order were emphasized, and changes were made only when a resident was admitted, died, or was transferred. For the most part, the resident population showed little change or turnover. In addition, the technology mainly consisted of providing food, housing, medical services, and perhaps some recreation, all on a systematic, routinized basis, to residents en masse, following regimented schedules. Management was characterized as relatively mechanistic, with centralized decision making, vertical lines of coordination and control, formal communication modes, and emphasis on authoritarian styles of supervision. Policies and procedures were established and remained static for years. There was little need to adapt or change.

Consider the change to the treatment-placement model. The circumstances are much less predictable. The rate of turnover of clients is expected to be fairly rapid and variable. Some individuals are brought in for diagnostic tests or temporary placement but soon move on to local community facilities, while others remain in residence for longer periods of time. The types of disabilities presented are more varied. Furthermore, the presumed potential of clients for development or training requires that treatment change from mass to individualized services. Each particular resident needs specialized programs based on his or her specific disabilities and the most effective treatment plan. These concurrent changes in environmental stability and technology call for shifts toward a more organic management system: decentralized

decision making, horizontal lines of coordination (through team committees, and special liaison persons), informal communication modes, and democratic styles of supervision.

Such trends are not unique to mental health programs. Many organizations are undergoing similar evolution from relatively stable closed systems toward more adaptive, open systems with associated changes from hierarchical, formal, and centralized structures to latera informal, and decentralized management forms.

Linking Organizational, Work Group, and Individual Ethical Characteristics

The organization within which human services are carried out has strong effect on the ways staff will deal with ethical problems and carry out decisions. As we saw earlier, the organization, the work group, and the individual interact in the delivery of services. Conflicts within any of these interactions can have detrimental consequences for service. Let us examine the linkages among these three levels more closely. In doing so, we will make use of the two dimensions used to examine ethical orientations—source and focus. It is possible to examine organizations using these same two dimensions, with the organization position relative to these two dimensions determined by the characteristics of structure and technology.

We may recall that ethical orientations were seen to vary from reliance on sources of authority external to the individual to an emphasis on individual responsibility in decision making. We identified this dimension as the source of principles for decision making. Likewise, organizational structure was seen to vary across a continuum from an emphasis on individual discretion to externally centralized authority. At the latter extreme, decision-making authority is centrally vested in the chief executive officer and minimum discretion left to the individual worker. Here, authority is completely external to the staff member, and his actions must be conducted in strict compliance with formal rules and policies with a minimum of latitude for modifications. At the other extreme is a decentralized or collegial structure, where extensive decision-making authority is vested in the front-line worker. Such individuals must rely on their internal capabilities and knowledge of resources and alternatives to deal with work tasks or problems. External rules are minimized and individual adaptability and creativity are maximized. Between such extremes lie intermediate forms of structure with varying mixes of control and discretion.

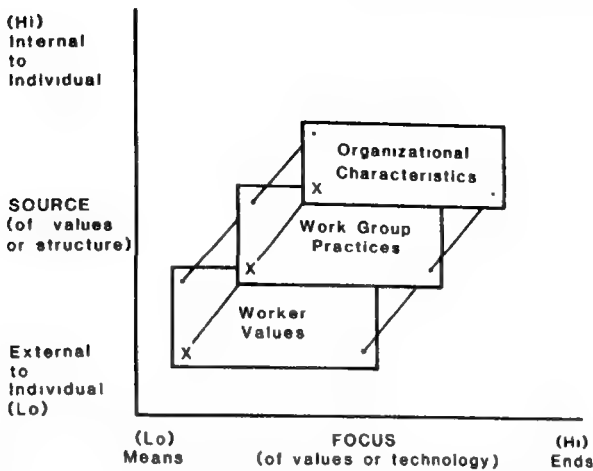


FIG. 3—Source of authority for and focus of decisions at the individual, work group, and organizational levels

We may also recall that ethical orientations were seen to vary from a reliance on standards of behavior, rules guiding activities, or methods of treatment to an emphasis on actions taken in order to achieve desired goals or outcomes. We identified this dimension as the focus of decision making, ranging from a means orientation to an ends orientation. Similarly, the treatment technology of the organization was seen to vary across an analogous continuum from a concern with methods or activities to an emphasis on results. At one extreme, the service-delivery processes may emphasize outcomes, ends, or goals with less detailed attention to techniques, means, or rules. The latter are to be selected and adapted in order to attain the maximum results possible. On the other hand, the organization may assume or require that the preferred activities, regulations, or standard procedures are to be emphasized and maintained, regardless of fluctuations in outcome. Here, the means are seen as more important than the ends. Again, intermediate forms reflect varying levels of emphasis on treatment technology in different organizations.

Thus individual workers' values, values of the work group, and characteristics of organizations may be seen as linked along these two parallel dimensions: the focus for decisions, means versus ends of action, and the source of authority for decisions, either internal or external to the individual. These relationships are illustrated in figure 3. It may be inferred that in circumstances where there is harmony or consistency among the organizational characteristics, the work group's perspectives, and the workers' ethical perspectives, there will be greater satisfaction and effectiveness among staff.

A variety of predictions may be drawn from these ideas. One would expect, for example, to encounter conflicts in an agency where the staff placed high importance on decision making according to standard professional procedures, and the administrators emphasized getting desired results. Likewise, problems could be anticipated in circumstances where workers' values emphasized self-direction in decision making and the organization considered policies to be the exclusive domain of the chief executive officer, or where a worker valued basing decisions on outcomes while his or her colleagues emphasized process. A mismatch along either set of dimensions at any level would be expected to have a negative impact, while congruence would be expected to have beneficial consequences for all.

Implications for Service Delivery

Our analysis of the dimensions of focus of values and technology and source of structure and values is couched in the conceptual approach of congruence theory. Workers' performance, satisfaction, and effectiveness are directly related to the congruence between individual characteristics and those of the work environment. Our foregoing discussion may be drawn together into a series of inferred conclusions or propositions, which are here presented in a form so as to facilitate their empirical testing.

1. Worker satisfaction and effectiveness are positively related to congruence between the individual's value preferences (along either the focus dimension or the source dimension) and the values of his co-workers. The greater the congruence on the focus dimension, the greater will be the individual's satisfaction and effectiveness. Likewise, the greater the congruence on the source dimension, the greater will be the satisfaction and effectiveness.

2. Worker satisfaction and effectiveness are positively related to congruence between the individual's value preferences (along either the focus dimension or the source dimension) and the organization's characteristics (its treatment technology and decentralization). The greater the congruence between the value position of the worker on the source dimension and the position of the organization's structure on the source dimension, the greater will be the individual's work satisfaction and service effectiveness. Similarly, the greater the congruence between the value position of the worker on the focus dimension and the position of the organization's treatment technology on the focus dimension, the greater will be the satisfaction and effectiveness.

3. Worker satisfaction and effectiveness are positively related to congruence between the value preferences of the work group (along

either the focus or source dimensions) and the organization's characteristics (its treatment technology and decentralization). The greater the congruence between the value position of the group on the source dimension and the position of the organization's structure on the source dimension, the greater will be the workers' satisfaction and effectiveness. Similarly, the greater the congruence between the value position of the group on the focus dimension and the position of the organization's treatment technology on the focus dimension, the greater will be the workers' satisfaction and effectiveness.

4 Worker satisfaction and effectiveness are positively related to congruence among all three configurations—that of the individual, the work group, and the organization. The greater the simultaneous fit or congruence among the workers' value configuration (relative to both the focus and source dimensions simultaneously), the work group's value configuration (relative to both the focus and the source dimensions simultaneously), and the organization's technology-structure configuration (relative to both the focus and source dimensions simultaneously), the greater the individual's satisfaction and effectiveness.

Suggested Directions

The delivery of human services is undergoing profound changes. These changes are taking place in the environment, in the technology of service, in the structure of organizations, and in the jobs of staff. The consequences for staff, clients, and programs have not been clearly understood or documented. In the present article, we have attempted to draw together a variety of concepts from theory, research, and practice and to synthesize them into a set of testable propositions regarding human services.

In order to develop a better understanding of such programs, further study is needed on how key properties of workers and organizations influence members' attitudes, behaviors, and effectiveness. We believe that the framework outlined in this paper can provide a base for fruitful elaborations that will provide additional hypotheses for investigation in empirical research undertakings. In particular, we suggest the following four directions for future development: (1) refinement of the concept of "congruence," (2) identification of additional characteristics of workers and organizations that might vary along the two dimensions discussed in this paper, (3) incorporation of additional levels within human service-delivery programs into the congruence framework, and (4) identification of other dimensions along which characteristics at the various levels may vary.

The congruence perspective itself needs further refinement. Although its basic usefulness seems to have been fairly well established, many ambiguities remain. For example, could there be some useful level of misfit or gap between individual need and environmental supply that stimulates a creative tension or spur to growth? Might such tension be facilitative only along some dimensions and not along others, or only relative to one set of characteristics and not to others? Are there dimensions along which congruence is crucial and others where it is incidental, or is congruence in and of itself facilitative? Do influences of congruence vary according to the setting and role of the individual?

Such general questions lead well beyond the scope of the present discussion. However, to underscore their importance, let us consider briefly the possibility of misfit versus fit between workers' values and organizational structure. If we were to conceptualize congruence between the worker and the organization along the dimension source of authority for decision making, three possibilities arise: worker and organization could be at the same location along the dimension, the worker could value more individual initiative than the organization allows, or the worker could value less individual initiative than the organization requires. Is the perfect match more facilitative of effectiveness than is either type of mismatch? Is an overabundance of a resource in the environment an example of misfit, or is it more appropriately termed a congruence? Is an overabundance conceptually equivalent to a deficit insofar as both are instances in which there is not a perfect match between requirements and resources? As this simple example suggests, serious conceptual attention to the likely impacts of different sorts of mismatches between person and environment is needed if we are to develop a working definition of congruence or fit to apply in research in human service-delivery programs.

Characteristics of workers other than their value orientations and characteristics of organizations other than structure and technology are likely to be important considerations when examining the fit between staff and their work environment. Factors that affect feelings of job competence and satisfaction include participants' tolerance for ambiguity, attitudes toward authority, preferences for individualism, and integrative or cognitive complexity.¹⁷ A person who demonstrates a high tolerance for ambiguity, a desire to work with a great deal of autonomy as an individual, and an ability to see events in complex ways will probably tend to feel more competent and satisfied under job conditions that are fairly changeable, adaptive, dynamic, unstructured, and uncertain. Conversely, a job situation that is stable, predictable, structured, and certain will seem more comfortable for an individual who has a low tolerance for ambiguity, a desire to work under closely directed work conditions as part of a group, and a tendency to see events in less complex ways. Thus, it would appear that numerous

characteristics of workers' cognitive styles have underlying them a source and a focus dimension that could be developed in the manner suggested by this paper. Similarly, organizational characteristics common in the literature might prove, upon close inspection, to vary along such dimensions.

A crucial level within any human service program omitted in the present paper is that of the client. Another is the environment surrounding the program and the constituency to which the program looks for support and input. Extremely important characteristics at each of these levels can be speculated to vary along the dimensions of source and focus. We might suggest several possibilities. Clients' motivation for seeking services could vary along both. Is the client there of his own volition, or because an external agent has placed him there? Is the client there to "go through the motions," participate in the process, or is he there because he wants particular outcomes as a result of participating? With regard to the constituent environment, we might examine the characteristic of political/financial control over the program and ask whether the controlling constituency is directly linked into the program or internal to the approximate community surrounding the program, or whether the controlling power of the constituency is quite external to the community in the manner of a state legislature or the Congress. Similarly, the financial support given to the agency may be supplied irrespective of results because the program is "good in and of itself" or it may be given with the goal of seeing results and dispersed under explicit conditions of accountability.

Finally, we suggest that additional dimensions might be incorporated into the model, the isolation of which will be the result of creative examinations of similarities in characteristics across multiple levels within programs. Such possibilities point to expansions of the framework that offer potential for deepening our understanding of the operations of human services. Thoughtfully developed and tested theory can guide the improvement of these programs.

Notes

1. We would suggest that such congruence among staff, work group, and administration is necessary, although not sufficient, for effective delivery. The fit between the client and the other levels of the system forms the final, more system-specific, link in the change process.

2. Prisoners, school children, juvenile delinquents, mental patients, spouses with marital problems, and so forth may all be viewed as needing services in order to function well in society. Furthermore, all are vulnerable, some emotionally and some because they are legal minors and/or have been stripped of full legal rights.

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Males' and Females' Perceived Reasons for Their Use of Heroin

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Few attempts to explain the etiology of drug use have considered users' own perceptions concerning their reasons for using drugs. This paper describes an effort to identify underlying dimensions of perceived reasons for heroin use. The results indicate two underlying dimensions—one functional and the other cultural. A multigroup-multimethod approach to the data analysis was used to establish the validity of the identified dimensions. The results were consistent across analytic techniques and for both males and females. Implications for ameliorative programs and policies are discussed.

The expanding use of nonmedical drugs in our society has resulted in numerous efforts to understand the dynamics of drug use within specific socioeconomic, ethnic, and gender groups. Clinical observation, psychological testing, and comparison of demographic characteristics among users and nonusers have identified factors related to the use of heroin. With only a few exceptions,¹ users' own perceptions about their reasons for using drugs have been ignored. Despite recognition that individuals often know more than others about their current internal states and past behaviors,² information from drug users seldom has been used to enhance understanding of the use of drugs. Clearly,

users' perceptions of drug use provide basic and important information for program and policy decisions.

Many explanations for drug use have been derived from fairly simple and obvious psychological and demographic differences between users and nonusers. However, these simple explanatory frameworks have not proved very useful.³ Given that drug use is a complex phenomenon influenced by multiple factors, the reasons for the use of drugs are numerous and interrelated. A more complete explanation requires simultaneous consideration of several contributing factors. Only a few studies have attempted to empirically derive underlying dimensions related to heroin use.⁴ These studies used psychological or demographic data to derive dimensions. Neither study considered users' own perceptions of their motivations for using drugs. Further, given recent research indicating sex differences in kinds, sources, and patterns of drugs used,⁵ it is important to examine how underlying dimensions may differ for men and women.

This paper reports an effort to reduce a large number of perceived causes for the use of heroin to a smaller number of underlying components. The data are respondent ratings (on a four-point scale) that indicate the frequency with which each of many possible reasons for heroin use has influenced the decision to use heroin. Underlying dimensions for the perceived causes of heroin use were derived by applying two separate data analysis techniques. The derived dimensions represent a distillation of users' own views concerning their use of drugs.

Methods

Sample.—The data were taken from a larger study that examined a number of demographic and psychosocial characteristics of heroin-using men and women.⁶ The subsample consists of 162 men and 162 women who entered heroin addiction treatment centers in Detroit, Los Angeles, and Miami between June and November 1976. All clients who entered cooperating treatment facilities in the three cities during this period were asked to participate in the study. All participants were free to refuse, and all received payment for the time spent in the interview. They completed the interview within three weeks of admission to the program. The average age of the women in the sample was 25.8 years; over 60 percent were nonwhite. Fewer than 20 percent were married at the time of the study. On average, the women had completed 11.2 years of education and had been employed for 6.9 of the previous twenty-four months. The men on average were slightly

older (27.5 years) and more likely to have been employed (11.4 of the previous twenty-four months). There were no differences between men and women with regard to race, marital status, and average amount of education.

Item development.—The items used as reasons for drug use were derived from a long list of possible reasons for using heroin generated by a group of users, ex-users, and researchers. The users and ex-users were from one of the cooperating heroin addiction treatment facilities and were similar in age, race, and educational status to the respondents in the subsample. Users and ex-users eliminated from the list items judged to be irrelevant, leaving a set of twenty-two items. For the present analysis, eight of these items were eliminated due to (a) nearly uniform agreement among respondents that the item was not relevant, (b) ambiguous meaning, or (c) differential applicability to men and women (e.g., "To avoid becoming pregnant" was eliminated). The remaining fourteen items were used; these items are listed in table 1. The interviewer introduced the list to the respondents as follows: "I am going to read a list of some reasons for using heroin. After each one, please tell me how often, if ever, you have used heroin for that reason by choosing one of the answers on this card—very often, often, once in a while, or never."

Data analysis.—Each respondent rated each of the fourteen reasons. Initially, the responses from men and from women were analyzed separately. For either sex, the data can be viewed as an " N subjects" \times "fourteen reasons" rectangular array of responses.

Each " $N \times 14$ " data set was analyzed using multidimensional scaling. Nonmetric multidimensional scaling is a geometrical model that seeks to locate in a two, three, or more dimensional space a point corre-

Table 1

FOURTEEN REASONS PRESENTED TO THE RESPONDENTS

Reasons	Abbreviation Used in Tables 3 and 4
To feel good	To feel good
To be accepted by my friends	Accepted by friends
To loosen up in a social situation	Loosen social sit
To help get to sleep	Help get to sleep
Because of hassles from my parents	Hassle from parents
To cope with sexual problems	Sexual problems
Because of physical pain or illness	Pain/illness
To help me forget my problems	Forget problems
Because of tension or nervousness	Tension/nervousness
Because of feeling down or disappointed	Down/disappointed
To avoid getting sick	Avoid getting sick
Because I can't make it without it	Can't make it
To keep from being bored	Bored
To be hip	To be hip

NOTE.—Response scale. very often, often, once in a while, never.

sponding to each variable (i.e., a point for each of the fourteen reasons). Obviously, such a large data set contains a great quantity of information; most data analysis techniques require as a first step reducing the data into a set of summary statistics that gives a more compact and manageable, though less detailed, representation of the raw observations. Multidimensional scaling requires a similarity measure for each pair of variables (i.e., for each pair of reasons). This set of ninety-one similarity measures, one for each pair, forms the summary of the data used for the analysis. The similarity measures can be determined in a number of ways, and the exact procedure used here is described below.

The multidimensional scaling model seeks to locate the points, representing reasons, such that more similar reasons are located a shorter distance apart. The idea is that the relative similarity of two reasons indicates relative proximity (reasons more similar should be closer together in the geometrical space). The nonmetric aspect of the analysis technique is that the similarity measures are treated only ordinally. That is, all that matters is the ordering of the ninety-one similarity measures, not their actual values. Though the technique seeks to locate points in space such that the most similar pair of reasons is represented by the closest pair of points, the next most similar pair by the second closest pair of points, and so on, usually it is not possible to locate the points (14 of them, in this case) such that the ninety-one interpoint distances are precisely in the same order as the ninety-one pairwise similarities (given a fairly small number of dimensions in the space). The points are located so as to minimize the discrepancies.

Given these locations of the points, it is the task of the researcher to identify the orientation and meaning of the axes of the derived space. When the points in the space project along a straight line that represents a meaningful continuum, the line may be interpreted as representing an underlying dimension. Thus, nonmetric multidimensional scaling allows one to infer underlying dimensions from the similarity measures.

An important issue in any nonmetric multidimensional scaling analysis is the procedure by which the similarity measures are derived. The procedure used here was a two-step process. The first step involved converting each subject's fourteen responses to ranks (i.e., assigning the rank 1 to the reason each subject rated as most frequent, rank 2 to the next most frequent, and so on down to rank 14). When two or more reasons were tied, they were assigned the average of the ranks at which they were tied. Converting each individual's set of responses to ranks eliminated the variation with which different subjects might use the response categories. Though this removed the average magnitude of each subject's responses, this loss of information is not serious since the subjects were known to use drugs and thus all had sufficiently

strong reasons to do so. The second step in the similarity-measure construction procedure was computation of the Spearman rank-order correlation for each pair of reasons. These rank correlations then were used as the similarity measures. The multidimensional scaling analyses were carried out using ALSCAL-4.⁷

Many alternative data analysis techniques may be used to reduce a large number of related variables to a smaller set of underlying dimensions. However, one must be wary of the results from any single analysis for a number of reasons. A single sample from a large population may include a few unrepresentative, extreme cases that can greatly affect the overall results. Further, subgroups within the sample may reveal different results when analyzed separately as compared to results from a single analysis with all subgroups pooled. Most important, since the numerical algorithms always produce a derived solution, in some cases the solution is an artifact of the statistical technique rather than a meaningful result useful for substantive inference. In order to avoid these problems, we have adopted a "multigroup-multimethod" approach.⁸ In addition to multidimensional scaling, we analyzed the variance-covariance matrix for the raw data using principal components analysis.⁹ To the extent that each method yields the same interpretation, the results are unlikely to reflect methodological artifact. In addition, the complete data set was divided randomly and the analyses completed independently on each random half. This allowed identification of results that were consistent across the randomly chosen subgroups of the sample. To assess the possibility that the results are different for men and women, each type of analysis was performed separately for each sex. Using this multigroup-multimethod approach, it was possible to discard solutions that were not replicated with other methods or subsamples, and thus to extract the consistent results that repeatedly appeared with different techniques and partitions of the data set.

Results

Users' perceptions of reasons for heroin use.—Multidimensional scaling can be done in two, three, or more dimensions. The goal is to find the minimum number of dimensions that gives acceptably low lack-of-fit. Lack-of-fit is expressed by a measure called "stress." The lower the stress, the lower the lack-of-fit (i.e., lower stress implies a better fit). Men and women were analyzed separately, and for each sex a separate analysis was done for two, three, and four dimensions. The stress value resulting from each analysis is shown in table 2. The stress measures indicate that at least three dimensions are necessary. The

Table 2

STRESS MEASURES FROM MULTIDIMENSIONAL SCALING ANALYSES

	Men	Women
Two-dimensional analysis	17	21
Three-dimensional analysis	12	12
Four-dimensional analysis	07	08

four-dimensional solution did not result in an extremely large reduction in stress. Because a four-dimensional multidimensional scaling solution has an uncomfortably large number of free (estimated) parameters for these data sets, the four-dimensional solution was not chosen. For both men and women, the three-dimensional solution was used.

The coordinate axes derived from a multidimensional scaling solution are completely arbitrary, and thus the axes from the scaling procedure may be rotated to determine a meaningful interpretation. Following rotation, each reason is located in reference to each of the three coordinate axes. The value for each reason on each dimension is shown in tables 3 and 4 (for women and men, respectively). In multidimensional scaling, the sign (positive or negative) and the overall magnitudes of the coordinate values are arbitrary. All of the coordinates may be multiplied by any single positive or negative number without affecting the multidimensional scaling solution.

The results may be interpreted by noting which items (i.e., reasons for drug use) cluster together at ends of the various dimensions. For both sexes, at one extreme of the first dimension are reasons related to social relationships and behaviors, such as "To be hip," "To be accepted by friends," and "To loosen up in a social situation"; at the opposite end are physical well-being reasons, such as "To help get to sleep," "To avoid getting sick," and "Because of physical pain or illness." This component appears to separate the use of heroin for social functioning from use to facilitate physical functioning; we label it the "social functioning-physical functioning" dimension. This dimension is quite similar for men and for women.

The second dimension for each sex distinguishes the use of heroin for reasons traditionally associated with the drug subculture, such as "Can't make it without it," "To feel good," "To loosen up in a social situation," "To be hip," and "To keep from being bored," from reasons related to coping with conventional life problems, such as "Because of hassles from parents," "To help forget problems," and "Because of feeling down or disappointed." We label this dimension the "conventional culture-drug culture" dimension.

The third dimension for each sex shows little agreement between sexes (for dimension 3, the Spearman correlation for men and women

Table 3

MULTIDIMENSIONAL SCALING ANALYSIS FOR WOMEN

	Dimension 1	Dimension 2	Dimension 3
Accepted by friends	2 02	Can't make it	Sexual problems
To be hip	1 77	To feel good	Loosen social sit
Forget problems	1 10	Loosen social sit	Pain/illness
Loosen social sit	88	To be hip	Hassle from parents
Bored	40	Bored	Accepted by friends
Down/disappointed	29	Avoid getting sick	To feel good
Hassle from parents	22	Accepted by friends	To avoid getting sick
Sexual problems	14	Sexual problems	Tension/nervousness
To feel good	11	Help get to sleep	Down/disappointed
Can't make it	- 74	Pain/illness	Help get to sleep
Tension/nervousness	- 1 01	Tension/nervousness	Forget problems
Pain/illness	- 1 60	Forget problems	To be hip
Avoid getting sick	- 1 73	Down/disappointed	Can't make it
Help get to sleep	- 1 85	Hassle from parents	Bored
			1 35
			98
			82
			61
			32
			28
			13
			- 02
			- 26
			- 51
			- 57
			- 75
			- 94
			- 1 45

Table 4

MULTIDIMENSIONAL SCALING ANALYSIS FOR MEN

	Dimension 1	Dimension 2	Dimension 3
To be hip	1.88	Loosen social sit	Forget problems
Accepted by friends	1.70	Can't make it	To feel good
Loosen social sit	1.31	To feel good	Loosen social sit
Bored	1.05	Avoid getting sick	Tension/nervousness
Hassle from parents	.79	Pain/illness	Pain/illness
Forget problems	.70	Sexual problems	Sexual problems
Down/disappointed	.35	Accepted by friends	Can't make it
Sexual problems	.16	To be hip	To be hip
To feel good	.00	Bored	Down/disappointed
Tension/nervousness	-.125	Help get to sleep	Avoid getting sick
Help get to sleep	-.150	Hassle from parents	Hassle from parents
Avoid getting sick	-.152	Forget problems	Accepted by friends
Pain/illness	-.182	Tension/nervousness	Bored
Can't make it	-.184	Down/disappointed	Help get to sleep
		
			1.23

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is .26, far lower than the .90 and .81 values found for dimensions 1 and 2, respectively), and has no clear interpretation that we could discover. Therefore, we do not assign it an interpretation.

As mentioned above, we also analyzed the data for men and for women using principal components. For each sex, the results were similar to the multidimensional scaling solutions. The first bipolar principal component revealed a "social functioning-physical functioning" continuum; the ordering of the fourteen reasons for this component correlated highly with the ordering along the similar multidimensional scaling dimension (Spearman correlation of .95 for women, .96 for men). The second bipolar principal component was similar to the "conventional culture-drug culture" continuum (Spearman correlation with the second dimension from the multidimensional scaling analysis of .73 for women and .53 for men).

A direct comparison of results from two different multidimensional scaling analyses, or from a multidimensional scaling analysis and a principal components analysis, is not possible because of arbitrary scaling factors that are implicit in a multidimensional scaling solution. However, these arbitrary factors do not affect the relative interpoint distances between pairs of points (each point representing one of the fourteen reasons) in the derived space; thus, the degree of similarity between the results from two analyses may be evaluated by computing the ninety-one interpoint distances (one for each pair of points) from one multidimensional scaling solution and the ninety-one interpoint distances from another multidimensional scaling solution and then correlating the ninety-one distances from one solution with the ninety-one distances from the other.

In a "multigroup comparison," the correlation coefficient for the multidimensional scaling solutions for men and for women is .72. In order to assess whether this correlation value indicates substantial differences between men and women, it is necessary to know typical values of this statistic when there are no differences between sexes (in which case the correlation deviates from 1.0 only due to sampling variation). Unfortunately, there is no accepted statistical procedure for this assessment. We therefore have used an approximation. If there are no differences between sexes, then splitting the 324 subjects in half on the basis of sex should yield two solutions that, on average, are as similar as two solutions found when the 324 subjects are split randomly. On the other hand, if there are sex differences, then dividing the subjects by sex should yield two solutions that are more dissimilar than when subjects are divided randomly. Thus, we must assess whether the correlation of .72 is smaller (indicating less similarity) than is typically found with a random division of subjects. This may be judged from the results shown in figure 1; each open circle indicates the correlation found for one (of 100) random division of all 324 subjects. The filled

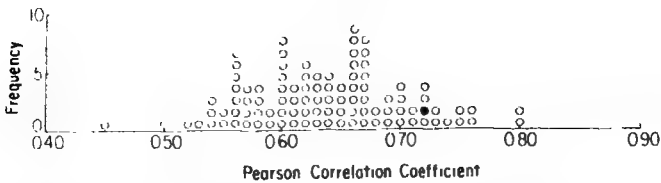


FIG. 1—Each point is the Pearson correlation coefficient (based on the ninety-one interpoint distances) for two different three-dimensional multidimensional scaling solutions (one solution from each of two groups of subjects). A lower correlation reflects larger differences between the two solutions. Each open symbol is the result from one (of 100) random partition of the 324 subjects into two groups of 162 each. The filled symbol is the correlation when the subjects are partitioned by sex (i.e., all 162 women in the first group, all 162 men in the second group).

circle is the correlation with the subjects divided by sex. Clearly this correlation is not atypically low; in fact, it tends toward the high end, but not significantly so. Thus the multidimensional scaling analyses do not suggest different underlying dimensions for men and women.

When the multidimensional scaling (three-dimensional) and principal components (first four components only) solutions are examined in a "multimethod comparison," the Pearson correlation for women is .66; for men, the correlation is .62. The theoretical probability distribution for these correlations is unknown, but our experience is that these values indicate substantial agreement between solutions for our data sets with fourteen variables. As a rule of thumb (for these data and number of variables), correlations in this range are typical of values found when the data set is divided randomly into two halves and the results are compared for one type of analysis (either principal components or multidimensional scaling) applied separately to each half (see discussion in previous paragraph).

Summary and comment.—The results of the analyses of user-identified reasons for heroin use reveal two dimensions that emerge for both sexes and two analytic techniques. One dimension orders reasons for use of heroin in terms of physical functioning versus functioning in social situations. The social functioning aspect of heroin use has been suggested as more important for men than for women; women are more inclined to use this and other drugs as a means of self-medication.¹⁰ While the analyses described here do not provide information about the relative importance of these reasons for men versus women, they indicate that the continuum from physical to social functioning is a salient dimension for heroin-use motives for both groups. Of course, while heroin may be used initially to achieve mastery over certain functional difficulties, this particular adaptation itself can lead to subsequent problems. Indeed, when addicts describe the consequences

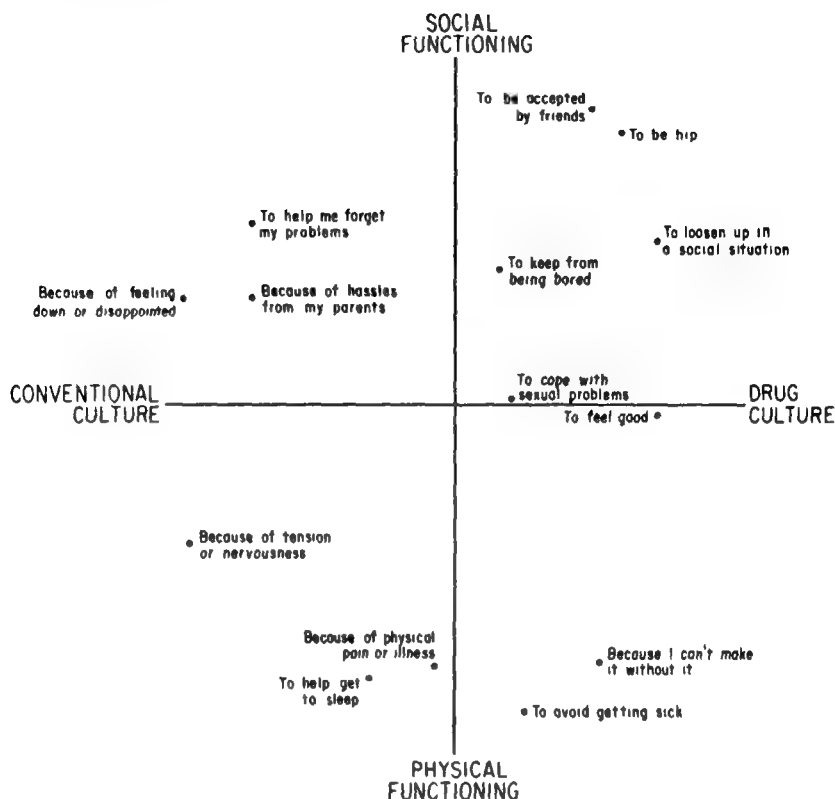


FIG. 2—Multidimensional scaling results based on all 324 subjects (see text)

of drug use, they attribute certain difficulties—both personal and social in nature—to the habit of using heroin.¹¹

A second underlying factor revealed by our results has at one extreme items related to the use of drugs within a drug subculture. These items are consistent with a view of drug use as a means to achieve a high "to feel good" within an organized life-style; they specifically are related to maintaining the positive feelings achieved through drug use. Levine and Stephens¹² have suggested that a primary distinction can be drawn between users who use drugs alone versus those in a larger subculture of addiction. For example, they suggest that few Vietnam GI addicts maintained the drug habit after returning to the United States, presumably because the cultural context was not supportive. The subcultural user may be contrasted with the individual who uses heroin privately to achieve some mastery over specific life stresses. In a conventional setting, drugs provide an aid for adapting to certain life problems; or the other hand, in a subcultural context shaped by the use of drugs maintenance of this adaptation is itself a central concern.

Though the correspondence for each reason is not perfect for both analysis techniques, the overall pattern of results is very similar, indicating that the derived dimensions are not methodological artifacts. The similarity of the results for men and women suggests that the most representative set of dimensions may be found using the complete data set (with all 324 subjects) in a single multidimensional scaling analysis (since multidimensional scaling is more robust because it assumes only ordinal measures). The stress for this three-dimensional analysis (.09) is slightly lower than for either sex considered alone (compare table 2). Derived dimensions 1 and 2 are shown graphically in figure 2. As expected, the results reveal "social functioning-physical functioning" and "conventional culture-drug culture" continua.

Discussion

Our results indicate that perceived reasons for using drugs fall along a continuum that extends from physical problems to problems in one's social environment. Further, the perceived reasons for drug use fall along a second continuum that reflects the social context within which one operates. The use of substances to enable or enhance functioning is recognized within nearly every explanatory framework for drug use. Indeed, this is why prescription drugs are dispensed. The addition of a contextual dimension is consistent with the view that the way to use drugs, like other behaviors, can be learned by watching others in one's environment. As Carlin and Stauss suggest, "social learning and modeling play an important role in drug selection, perception of drug effects, route of administration, and probably the decision to use drugs at all."¹³

The validity of our derived dimensions is supported by their similarity to the empirically and clinically derived dimensions identified by Carlin and Stauss.¹⁴ They determined functional and contextual dimensions related to polydrug use, which they labeled, respectively, the "self-medication-recreation" and the "streetwise-straight" dimensions. The data presented here provide support for their assertion that their "classification scheme is independent of drug choice and applies equally well to users of other substances."

The reliability of these dimensions gains support from their consistent emergence across both sexes, randomly divided subsamples of the data, and two separate data analysis techniques (principal components and multidimensional scaling).

Programmatic and policy implications.—The derivation of underlying dimensions related to heroin use not only adds to our understanding

of factors influencing drug use but also has implications for the design of intervention approaches. Earlier classification schemes identified narcotics abusers as either sociopathic or suffering psychological distress.¹⁵ As a result, treatment has consisted primarily of chemotherapy and psychotherapy. Extrapolating from the findings of this study, it is possible to identify more specific directions for treatment.

The functional dimension suggests that treatment should seek to address a range of dysfunctional behaviors that addicts perceive to be related to their drug use. Personal problems may include both physical and emotional discomfort, indicating the need for medical care in addition to traditional counseling interventions. Recent research shows that among women drug users, medical and dental problems occur more frequently compared to either nonaddicted women of similar socioeconomic status or addicted men.¹⁶ A recent survey of drug-treatment program administrators revealed that this group cites medical and dental assistance as necessary services for both men and women.¹⁷ If intervention programs are to address the self-medicating aspects of heroin use, then the physical as well as mental health of users must be addressed.

Given users' concern with their interpersonal functioning, services should recognize users' roles as family members, parents, friends, and workers. Users often are very dissatisfied with their performance in these roles.¹⁸ The provision of child care during parents' involvement in treatment is one way programs can acknowledge the importance of users' roles as parents. The existence of a child-care component in a program provides a natural forum for working with parents on parenting skills and child development issues. For women in particular, the availability of child-care services increases the accessibility of substance-abuse services.¹⁹ An active role played by family members, friends, and spouses also can be very important. The support and involvement of family members in the treatment process is known to be related to more positive treatment outcomes.²⁰

Finally, vocational counseling and job training provide a means for users to enhance their functioning as workers. Approximately 70 percent of those individuals treated in drug programs are unemployed at discharge.²¹

Obviously, some of the problems that lead to drug use are different for men and women, but it is important to note that the basic underlying dimensions found here are virtually the same. Both men and women require alternative mechanisms for coping with basic problems in living. The burden of child care rests most often with women; health and housing problems also are more typical for women drug users than for men.²² However, drug treatment programs often focus on rehabilitating men and women for narrowly defined, stereotypical roles in society rather than addressing the particular problems individuals bring

to treatment. As a result, women have been much less likely than men to be involved in vocational counseling and job training,²³ and often single-parent fathers are not offered child care.

Given the second major dimension underlying addicts' perceived reasons for their drug use—conventional versus drug-cultural influences—service programs should attend to the client's social context. This consideration has implications for both the mode and the location of treatment. To the extent that an individual uses drugs in a subculture in which drug use is an important aspect of social interaction, inpatient milieu therapy (e.g., Synanon or other types of therapeutic communities) in a different location may be more effective initially than community-based treatment. On the other hand, users who lack involvement in a drug subculture can be more appropriately served by a geographically accessible, community-based agency.

Differences among heroin users in terms of their needs and social functioning indicate the inadequacy of unidimensional characterizations of factors related to heroin use and service provision. The findings of this study support others that suggest that some heroin users will require health and mental health services, some may require termination of drug use; others may need the support of some form of chemotherapy, and some will be best served by the opportunity to acquire interpersonal and vocational skills. For many, these services may be provided effectively by a community-based outpatient clinic; others will require treatment on an inpatient basis. Recognition that heroin users are a heterogeneous group is a prerequisite for designing more effective and tailored intervention strategies.

Notes

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9. For the principal components analysis, the variance-covariance matrix is the summary of the data used. In computing the matrix entries, it is assumed implicitly that the observed data (in this case, the category responses of the subjects) are measured on an interval scale. The total variance is defined as the sum of the fourteen individual-variable variances. In principal components analysis, new variables are defined that are weighted sums of the fourteen old variables; the first such new variable captures as much of the total variance as possible, the second new variable (uncorrelated with the first) captures as much of the remaining variance as possible, and so on. The goal is to define a new set of variables (each new variable a different weighted sum of the old) such that each new variable accounts for the largest possible amount of the remaining total variance. By observing how the original variables correlate with the newly defined ones, the original variables can be grouped by their positive or negative relationships with the new variables. When a small number of new variables accounts for a large portion of the total variance, one may observe how the original measures combine to compose a small number of uncorrelated new variables that parsimoniously account for most of the total variance. Carrying the interpretation one step farther, the new variables may be viewed as basic underlying quantities resulting in the observed responses. The principal components solutions were not rotated in order to provide direct analysis of the raw data that is relatively free of subjective judgments from the data analyst. Such analyses, allowing few choices by the data analyst, provided a useful comparison with the multidimensional scaling analyses, which included a choice of procedure for transforming the raw data to similarity measures and of axis rotation for defining the derived dimensions. For further discussion concerning principal components, see John R. Schuerman, *Multivariate Analysis in Human Services Research and Evaluation* (Boston: Kluwer-Nijhoff, in press).

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Edith Abbott and the Chicago Influence on Social Work Education

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Edith Abbott exerted a significant and lasting influence on the shape of present-day social work education. A pioneer in professional social work, and a close associate of Sophonisba P. Breckinridge, Edith Abbott incorporated social work training into the structure and educational policy of a university. In large measure, the curriculum that she designed defined the newly developing profession and widened the boundaries of the social welfare system that she intended the social work profession to direct and staff.

Edith Abbott was a major architect of the present-day curriculum in social work education. After graduating from the University of Nebraska, she came to the University of Chicago to further her education. She earned a doctorate in political economy in 1905, and was an outstanding student. She then spent a year in Boston with the Women's Trade Union League and the Carnegie Institution, and a year in England studying at the London School of Economics and Political Science, where she came under the influence of Fabian socialists Beatrice and Sidney Webb. A year of teaching economics at Wellesley College followed—an appointment that signified a degree of elitism to the new generation of educated women. Nevertheless, in 1908, at the invitation of Julia Lathrop and Sophonisba Breckinridge, Edith Abbott joined the faculty of the little-known Chicago School of Civics and Philanthropy.

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to help develop a social research program. She was influenced to return to Chicago by her commitment to coeducation and by the opportunity to live at Hull House, where she expected the vigorous activity of Halsted Street to be "a welcome contrast to the cool aloofness of a New England college for women."¹ Most important, she returned to Chicago because she saw an opportunity to develop new methods of social research that would relate closely to the professional interests of social workers, and at the same time make social research an integral part of professional education.

Twelve years later, faced with what appeared to be insurmountable financial and curricular problems within the School of Civics and Philanthropy, Breckinridge and Abbott negotiated a merger into the University of Chicago. Abbott became dean of the new School of Social Service Administration in 1924. The transfer of the school constituted a remarkable achievement on the part of Edith Abbott and Sophonisba Breckinridge. Once accomplished, this pioneer undertaking carried heavy risks. Announcement of the new affiliation of the "old School," as Edith Abbott later reported to her alumni, "was received very coldly and critically by a discouraging number of friends among social workers."² The School of Social Service Administration was the first instance in which social work education was incorporated into the structure and educational policy of a major coeducational university. Such an affiliation was widely disapproved, not only by followers of Graham Taylor, who with Julia Lathrop had founded the School of Civics and Philanthropy, but by social workers and educators in the eastern part of the United States as well. Reasons for the opposition were embedded within the origins of social work training.

Recognition of the Need for Formal Training

In the late nineteenth and early twentieth century, preparation for social work, as had been true earlier for the professional schools of law, medicine, engineering, and teaching, was supplied largely by the apprenticeship system. A new employee in a charitable organization was given instruction from a regular staff member who assigned reading, offered conferences, and supervised the learner in carrying out specific tasks. Obviously no well-rounded view of the whole field was gained. The apprenticeship system operated only in the large charitable organizations of a few cities. These philanthropic agencies trained only the number of persons needed for their own staff turnover. No readiness was shown to train workers from other cities or other agencies.³

Meanwhile, charity organization societies were multiplying, and the need for trained workers was acute. What seems to be the first put recognition of this problem was given at a meeting of the International Congress of Charities, Correction, and Philanthropy in Chicago 1893, where Anna L. Dawes read a paper on "The Need of Training Schools for a New Profession." She proposed "... some course of study where an intelligent young person ... [with] an ordinary education ... [and others] already learned in the study of books can be taught what is now the alphabet of charitable science—some knowledge of its underlying ideas, its tried and trusted methods, and some acquaintance with the various devices employed for the upbuilding of the needy. ..."⁴

Public support for charitable agencies was limited, however, and there was little general recognition that philanthropy was work requiring technical skills. Most people in the community were quite willing to see persons without appropriate training and experiences employed by charitable organizations. In an address to the civic club of Philadelphia in 1897, Mary E. Richmond illustrated the problem by citing the following incident: A clergyman had written, "You ask me ... what qualifications Miss ... has for the position of agent in the Charity Organization Society. She is a most estimable lady and the sole support of a widow mother. It would be a real charity to give her the place."⁵

Later in that year Mary Richmond read a paper at the National Conference of Charities and Correction entitled "The Need of a Training School in Applied Philanthropy." She appealed for the development of professional standards based on the common ground of knowledge underlying all charitable work. She proposed that a training school be located in a large city with direct access to philanthropic agencies and, significantly, that any affiliation with a college or university not be allowed to interfere with an emphasis on "practical work" over theory and academic requirements.⁶

The resistance expressed by Mary Richmond to relying on universities and colleges to develop social work training was shared by many leading social workers of that day. They believed that universities had been slow to comprehend the significant service offered by the emerging profession and had shown little inclination to offer direction in the development of social work. James H. Tufts, a professor of philosophy at the University of Chicago, characterized this indifference as due to the fact that social work appeared to be a profession mainly for women. Eastern universities, patterned after the early colleges for men and organized before the days of social work, carried on the academic tradition of preparation only for the professions in which men were engaged. Colleges for women largely followed the curriculum model set in colleges for men.⁷

The scant interest in social work that did exist in academe came mainly from the developing field of social science, and even then

issues in philanthropy made up a very small part of the curriculum. Beginning in 1884, at Cornell University, Frank B. Sanborn pioneered in instruction on charities and correction, based on his rich experience with the Massachusetts State Board of Charities. His lectures were primarily on the treatment of public dependents which he supplemented with visits to reformatories and insane asylums. At about the same time, Amos G. Warner, general secretary of the Baltimore Charity Organization, was giving some valuable instruction at Johns Hopkins University. Subsequently, Warner gave a course of lectures on charities and correction at the request of Richard T. Ely, the director of the school of economics, political science, and history at the University of Wisconsin. Warner later expanded these lectures and, edited by Ely, they were published in a classic, first standard book on the subject of American charities.⁸

At Harvard University, in a course titled Philosophy 11, Francis G. Peabody was providing instruction and inspiration that turned many young men to social work. The content of Philosophy 11 included ethics of social reform and questions of charity, divorce, the Indians, labor prisons, temperance, and other problems of "practical ethics." The suitability of the material for a university curriculum was criticized by other Harvard faculty, and only Peabody's unquestioned reputation in the department of philosophy allowed him to offer the course in the country's oldest institution of higher learning.⁹

Some instruction in sociology and anthropology was offered at the University of Chicago from the time of its opening in 1892. Attention was given to the treatment of defectives and dependents, and gradually material was included on the treatment of crime, the social problems of the great cities, and the amelioration of rural life. Jane Addams, Florence Kelley, and Mary McDowell gave summer lectures. Some universities urged students to volunteer to observe organized charity organizations and settlements that they hoped would serve as laboratories for investigation in the social sciences.¹⁰

Sociology and Social Work Practice

Warner reported to the International Congress of Charities in 1893 that about a dozen colleges and universities were offering some degree of systematic instruction in charities and correction. Graham Taylor reported that sociology was then being taught in about that same number of theological seminaries with part of the content devoted to charities and correction under the title "applied ethics."¹¹ Bruno characterized these developments as the "honeymoon stage" of the inter-relationship between theory and practice, that is, between the teaching

of sociology and the practice of social work.¹² However, as sociology developed further as an academic discipline, it became more concerned with the study of normal human relationships and societal processes and reflected less interest in the social problems that were of immediate concern to social workers. In addition, some university faculty increasingly questioned the value of the charities and correction content in academe. They acknowledged that it was useful for certain practical goals, such as the promotion of good citizenship by arousing the interest of students who could then be expected to promote progressive philanthropy in their own communities. However, they believed the scientific method was little used in philanthropy and that there were serious obstacles to the application of social statistical methods within the setting of charities and correction.¹³

The sociologists' disenchantment with charities and correction was reversed and matched by leaders in charitable organizations who found the social science emphasis on developing theory as insufficient to the kind of help they needed to meet the insistent challenges in their day-to-day problems. As Bruno demonstrated from his analysis of the Proceedings of the National Conference of Charities and Correction: "The numbers of insane were increasing at an alarming rate; children were being brought up in almshouses; the mentally deficient were an increasing menace to the well-being of society; dependency was placing an ever increasing burden on taxpayers, and efforts to treat it were apparently waging a losing battle. . . . [These] were pressing exigencies which could not wait long for an answer."¹⁴

As a response to these frustrations, the Conference of State Boards of Charities, which had functioned as a section of the American Social Science Association, broke away from that parent body in 1879 to form the National Conference of Charities and Correction. With an expanded clientele and program, it rapidly became a more vigorous organization than the Conference of State Boards had been under the aegis of the social scientists. Significantly, however, upon separating from the Social Science Association, the conference gave up its strong interest in scientific inquiry into social problems. Attention shifted to methods of administering charitable organizations and techniques in giving help to individuals. A minority of papers given at sessions of the National Conference of Charities and Correction continued to deal with theory and the need for research and understanding of problems under consideration. For the most part, "the delegates wanted to know and discussed tirelessly such subjects as: Is it better to care for dependent children in institutions or foster homes, and why? How can the growing number of insane be handled? How can pauperism be prevented? And what to do about it all?"¹⁵

Edith Abbott saw social work as a discipline separate from sociology. Yet the historical perspective that she brought to all her undertakings

led her to denounce the early break away from social science with its resultant premature concentration on the development of treatment techniques. She was concerned that social theory was then very tentative and much in need of consistent criticism and testing, some of which social workers were in a position to supply. She believed that social workers could and should develop their own competence to determine whether or not certain subjects in the field of social treatment were suitable for a particular application of social statistics. In her view, the diversion from research that was a consequence of social work's move away from social science unnecessarily handicapped the profession for many years in developing scientific methods in social welfare program development and administration.¹⁶

The Growth of Social Work Schools

In 1898 the New York Charity Organization Society (COS) took a step toward establishing the kind of professional school that Mary Richmond had called for a year earlier. A six-week summer training course was offered, attended by twenty-seven students representing fourteen colleges and universities and eleven states. The summer course was recognized at once as fulfilling a pressing need and became a regular program of the New York COS for the next seven years. Among the summer students were individuals who became leaders in the emerging profession of social work, such as C. C. Carstens, Kate H. Claghorn, Carl Kelsey, W. Frank Persons, Paul U. Kellogg, Frances A. Kellor, Porter R. Lee, and others.¹⁷ This "summer school in philanthropic work" was the only organized effort to provide systematic training for social work until 1903, when the New York COS developed a six-month winter session with lectures in the late afternoon to accommodate social workers employed in the city. The following year, the New York School of Philanthropy was established and a full year of instruction was offered. Edward T. Devine, general secretary of the New York COS, became the first director, and the COS influence was maintained, although the new school had some slight relationship to Columbia University. Permanency and opportunity for growth were assured for the school in 1909–10 by a generous endowment from the will of John S. Kennedy. Although envious of this secure financing of the eastern model of social work education, Edith Abbott welcomed the endowment as an approval of all the schools in their efforts to sustain and extend public confidence in the importance of social work training.¹⁸

A school similar to that in New York was established in Boston in 1904 with some tenuous affiliation with Simmons College and Harvard

University. The school was directed by Jeffrey R. Brackett, who had become interested through his service on the New York COS's Committee on Philanthropic Education, and by Zilpha Drew Smith, who, as general secretary of the Boston Associated Charities, had been a dominant influence in the COS movement and a pioneer in efforts to develop training and study programs for her staff.¹⁹

The same demand for social work training as in other cities led Graham Taylor of the Chicago Commons and Julia Lathrop of Hull House to establish the Chicago Institute of Social Science in 1903 as part of the extension division of the University of Chicago. The Chicago effort reflected a significant difference from the eastern schools. Leadership for the training program had come out of the settlements instead of the COS. The Chicago Institute became a completely independent School of Civics and Philanthropy in 1908.

Almost at the same time that these enterprises were getting under way, interest in social work training found expression in St. Louis in a series of meetings for staff of the St. Louis Provident Association. Regular classroom work for a period of fifteen weeks was undertaken in 1907 and a full year course in 1908. The school, known as the St. Louis School of Philanthropy, began with an affiliation with the sociology department of the University of Missouri. In 1909 it was renamed the School of Social Economy and attached to Washington University, an arrangement that lasted until 1915 when the school was renamed the Missouri School of Social Economy and transferred back to the University of Missouri.²⁰

The success of these four schools led social agencies in three other cities to begin training programs: the Philadelphia Training School for Social Work in 1908, later called the Pennsylvania School for Social Service; the Richmond (Virginia) School of Social Economy; and the Texas School of Civics and Philanthropy at Houston. In 1913-14 these seven schools registered 900 students and granted 167 of them certificates of graduation.²¹

The Question of University Affiliation

All of the independent schools of philanthropy, except for the Pennsylvania School, at some time had an affiliation of sorts with a university or college. However, the relationship was nebulous, and no institution of higher learning was given a clear responsibility for standards of instruction or other educational policy of the professional schools. All seven were established by the efforts of social workers who feared that universities would "turn out theorists instead of persons equipped

along practical lines." These social workers wanted their training schools to reflect "the ideals of practical workers rather than . . . those of university teachers."²²

Edith Abbott's preference for locating social work education firmly within the universities was reinforced by papers given at the 1915 National Conference of Charities and Correction. In a speech entitled "Is Social Work a Profession?" Abraham Flexner, a noted authority on medical education, challenged his listeners by questioning the status of social work as measured by criteria for recognizing a profession. Although not doubting that social work involved essentially intellectual operations and not merely mechanical or routine ones, and that social workers derived their raw material from science and learning, Flexner was dubious about how well social work had translated a clear definition of a profession out of that scientific base. Social work appeared to him to be "not so much a defined field as an aspect of work in many fields." Such breadth of endeavor meant a certain superficiality of attainment. Further, Flexner held, the lack of specificity in aim seriously affected the development of training for social work. An educationally communicable technique was lacking.²³

Flexner was followed on the program by Felix Frankfurter, who further fueled Edith Abbott's interest in seeking university affiliation for social work education. Frankfurter called for the same adequacy in training for "the very definite, if undefined profession we call social work" as was required for the established professions of law and medicine. He maintained that schools for social work should seek "a complete association with a university" where there could be intimate contact with the other branches of a university's work and the school could be part of "a single intellectual community."²⁴

Leaders of the schools of philanthropy responded to the challenge in Flexner's paper with a determination to redouble their efforts to develop definite methods and technical processes that could be demonstrated and taught as required within a profession. Much of the energy of social work educators and practitioners was soon turned toward that endeavor. No such readiness to accept Frankfurter's prescription for university affiliation emerged, however. Most of the representatives of schools of philanthropy rejected his view and clung to their belief that standards of curriculum and instruction could be developed best by retaining a close link to social work practice and avoiding any significant sharing of responsibility with universities.²⁵ Their desire to remain unhampered by the traditions of higher education was increased by their distrust of the prevailing type of instruction in university departments of sociology. World War I accelerated a movement already under way among the social sciences to become more interested in community roles than the usual academic ones. Courses of study were modified to some degree to provide practical training

related to war needs. Sociology departments in fifteen universities cooperated with the American Red Cross in giving emergency training courses in home service—an activity that seemed to social workers to be a part of their domain. Furthermore, leaders in the movement for professional social work education observed that students in sociology rarely were required to obtain clinical experience in social agencies. Observational visits or research assignments to gather data from the files of social agencies made up their encounters with charitable organizations. As a result, in Jessie Steiner's view, sociologists tended "to underestimate what was involved in learning the techniques of social work. . . . They were not accustomed to regard participation in the work of a social agency as a valuable means of acquiring scientific knowledge of social problems."²⁶ The resistance among COS leaders to affiliations with universities was very largely based on the fear that universities as research institutions would not place appropriate value on practical fieldwork for students.

So strong was the opposition to schools of philanthropy being moved into universities that the Russell Sage Foundation, which had agreed to award the School of Civics and Philanthropy a new grant, withdrew its offer when the plan to move the school to the University of Chicago was announced, thus seriously endangering the financial stability of the new School of Social Service Administration. Years later Edith Abbott recalled that "it hurts me still to remember how cruelly we needed that money, and how hard it was to do without it."²⁷

Julius Rosenwald urged Edith Abbott to seek money from the Rockefeller family and lent his influence to a formal request. After two years of negotiation, the Laura Spelman Rockefeller Memorial in 1926 provided a gift of money to use for operating expenses of the school for a period of five years and appropriated an additional \$500,000 for an endowment with the provision that the university find a way to match it with \$1 million by 1931.²⁸ All through the 1920s and early 1930s, Edith Abbott worked under considerable pressure to help generate outside funds, first for operating expenses and then to ensure the endowment.²⁹

The two-year period of negotiation for the Spelman-Rockefeller grant served as a test of Edith Abbott's conviction about the proper form for social work education. Beardsley Ruml, director of the Laura Spelman Rockefeller Memorial, had proceeded slowly in relation to the request because of a possibility that the School of Social Service Administration might be able to obtain local funding from the Wiebolt Foundation in Chicago. The proposal for which the Wiebolts were willing to spend up to \$500,000 was for a downtown social work "training school" where all the private social agencies would be housed in a center for the practical training of social work. Desperate as she was for funds, Edith Abbott showed a kind of Puritan courage by

rejecting the proposal outright. She saw it as offering only a somewhat more systematic form of the old apprenticeship system and as posing a clear denial of her concept of professional education. Harold Swift, chairman of the board of trustees, and President E. D. Burton matched Abbott's faith in the proper direction for social work education by giving her assurance that the university would find a way to continue the school's program even after the expiration of the five-year guarantee given by the former trustees of the old School of Civics and Philanthropy.³⁰ A significant endowment had been at stake, but Edith Abbott and her close associate Sophonisba Breckinridge, supported by Swift and Burton, did not yield in their determination to develop a model of social work education based on social science theory and research within a major university.

The funding from the Spelman Rockefeller Memorial made possible a period of great growth and development at the School of Social Service Administration. For Edith Abbott it meant a reasonable assurance of permanence for the school, a base from which to attract a strong faculty and to address more substantially than had yet been possible the task of inquiry and publication, and the development of a scientifically based curriculum. Edith Abbott influenced social work education in a major and lasting way, apart from bringing it under the aegis of a university. She supported this achievement, as her published papers show clearly, by serving in large measure as a major designer of today's social work curriculum. Her differences with the opponents of university affiliation went beyond that single issue and reflected underlying beliefs, objectives, and strategies of social work education that were distinct from those held at the time by leaders in the schools of philanthropy.

The Practice Base

When Abbott and Breckinridge took the School of Civics and Philanthropy into the University of Chicago, social work in a very real sense was synonymous with family casework in voluntary agencies. Prior to the 1920s, caseworkers maintained a primary interest in the social environment and the living and working conditions of their clients. As Roy Lubove noted, casework was then still broadly defined to include any activity that was intended to influence behavior and improve the client's welfare. "It implied something as simple as a pair of eyeglasses for the youngster troubled by headaches or something as complex as the breakup of a family and the foster placement of the children. Casework services included a summer outing in the country for the tenement child or a new job for the man depressed by his inability to

support his family. It involved relief for dependent widows, a stay in a tuberculosis sanatorium, training in budgeting and household management for the housewife, or guidance for the young girl falling under the allure of the dancehall."⁴¹ Although service to individuals was the principal social work undertaking, rather than leadership in social reform, Mary Richmond continued to link the two by insisting that "the champions of casework are the champions of social reform also. . . . They have welcomed and still welcome every change that will tend to make health as contagious as disease, that will increase industrial opportunity, dignify leisure, and enrich the mental and social life of man."⁴²

Nevertheless, by the 1920s, the early training schools began to invest their curricula with narrow specialization and a concrete practical instruction that subordinated theory and research to an intensive quest for skill and technique. Lubove identified two troublesome legacies that the early schools passed on to future social work educators: specialized, practical education that inhibited the development of broad, scientific training, and caseworker control within the profession with casework as the nuclear skill in social work.⁴³

By the 1920s caseworkers had discovered Freudian doctrine and began to incorporate psychiatric thought and techniques into their work. The revelation of the unconscious, and the idea that social workers could now learn about their clients' inner life, with its dynamic effects on motivation and behavior, influenced social workers to move away from a form of social treatment based on rational assumptions, information, and environmental manipulation. Skilled casework now required insights into the client's psyche, and older ways of working suddenly appeared superficial. Psychoanalysis had become the scientific method for understanding the individual. From his analysis of the development of social work as a career, Lubove concluded that the mental hygiene movement and the child guidance clinics of the 1920s played a crucial role in turning social workers toward psychiatrically oriented casework. The fact that the clinics dealt with widely prevalent problems of mental health and emotional adjustment, instead of the narrower problems of economic dependency and relief, appealed to many social workers. They could identify themselves with psychiatry and the clinic team and thereby escape the stigma of charity and relief giving that was associated with earlier social work efforts. The clinic offered the vehicle by which psychiatric social workers could achieve a preeminent position among their colleagues; social casework was now a form of therapy.⁴⁴

Outside of Chicago the new philosophy of practice began to appear in social work education. Brackett forecast it at the National Conference of Charities and Correction in 1916 by saying that "what is needed most in social work is human beings rich in the subtle, compelling

power of personality."⁵⁵ Casework leaders began to view education for social work as a process to affect and mold the student's personality. The intent was to eliminate attitudes and behaviors that could interfere with casework effectiveness and to add to technical skill in ways that made possible a stronger and more psychodynamically helpful professional relationship. Porter R. Lee, director of the New York School of Social Work, was as fully committed as Edith Abbott to the professional development of social work education. However, sharp differences separated them as to how to define the profession and educate for it. At the 1915 Conference on Charities and Correction, speaking as chairman of the Committee on Education for Social Work, Lee said that "social work, strictly defined, deals with human welfare as affected by the economy of social life," and he endorsed the importance of training for both casework and scientific investigation of social problems.⁵⁶ Later, however, he came to view casework as dominant, and social research as documenting the development of therapeutic techniques. Casework, he said, was "fundamentally the influence of one personality on another . . . a deliberate human relationship at its best." Social work education was incomplete unless the training process facilitated within the individual student "certain definite personality developments which are quite as important in the practice of social casework as are experience and education in the more limited sense."⁵⁷

Edith Abbott disparaged the new emphasis on personality, which she saw as accompanied by a downgrading of "knowledge courses." To her, the new interest was a seriously misguided use of the profession's energy. She had limited understanding of the psychologist's current conception of personality or the nuances of the client's psychic life that consumed the interests of psychiatric social workers. She was, in fact, little interested. She had been much influenced early in her education by the writing of J. S. Mill and his interest in the formation of an exact science of human nature and the true causal laws of human character.⁵⁸ To Edith Abbott, reason and character, so fashioned as to be steady and constant, should govern behavior rather than psychic life. For her, reality was in the objective environment of the client, in the crowded homes and workplaces of adults and children, in the jails, the inadequate schoolrooms, and the hospital wards they inhabited. Reality for the poor and disadvantaged and handicapped was reflected in rates of unemployment, in the punitive environment of relief offices, and in the incidence of infant mortality. For her, little more needed to be said.

In discussing basic principles of professional education for social work before a large audience at the National Conference of Social Work in 1928, Edith Abbott stated her conviction that becoming truly professional meant following in the footsteps of the so-called learned professionals. "A good medical school is concerned with medical science

and takes little interest in the bedside manner; . . . the law schools . . . properly concern themselves not with the idiosyncrasies or personalities that make for the success of practicing lawyers but rather with the science of the law." No doubt she startled, offended, or amused some of her audience by saying with assurance, "Some of you may not agree with me about this matter of personality but I am convinced that this is only because you are using the word 'personality' when you really mean character."³⁹

To Edith Abbott, "character" was superior over "personality." Character was a reliable set of behaviors that enabled the individual, despite obstacles, to react in a consistent way in matters of morality and social justice. One did not need to question or study character—only form it, acquire it. Its components included, as Edith Abbott enumerated them, "honesty, courage, fair and square dealing, respect for human rights and for all human beings even if they are very poor and very troublesome, willingness to make personal sacrifices for a good cause and above all the ability to assume grave responsibility."⁴⁰ These qualities she said, often latent in the student, were the ones the professional school should discover and strengthen.

Edith Abbott wanted "a solid and scientific curriculum in social welfare." With a remarkable show of honesty before faculty of established disciplines, she told a convocation audience at the University of Chicago in the early 1930s that the distance yet to go in social work education was great indeed. "We are still in the early stages of organization, our scientific literature is just beginning to be written, our clinical facilities are still to be developed. . . . The academic curriculum of most of the professional schools is now poor and slight and covers in many schools only the various aspects of a single field—casework. . . . But casework, she emphasized, "is very far from being the whole story. . . ."⁴¹

The Chicago Curriculum

The whole story to Edith Abbott included interrelated fields of study of which every social worker should have an understanding. First was social treatment covering the principles of dealing with diverse families and individuals in need of assistance and advice. Social treatment, if not defined narrowly, was the "unique and the most fruitful of the recent contributions of social workers to the social order." Abbott wanted wide boundaries to the conception of "treatment" so that "the application of casework principles to our public services should not be forever neglected." A broad understanding was required—of social psychiatry, social aspects of medicine, immigration, and the principles of penology;

and criminal justice. In fact, she said, social treatment encompasses "the whole science of human relations."⁴²

Edith Abbott believed that there were no more fundamental subjects of study for the social work profession than (1) social legislation bearing on the major problems of social work, (2) the structure of government and its processes, (3) public welfare administration and its history, (4) basic economic principles, and (5) social research. "Must these always be referred to, slightly, as 'background courses'? They are professional courses to be enjoyed not by a well-educated few but by the rank and file who are to carry on our social service traditions in the future."⁴³ Enriched by Breckinridge's background of scholarship in law and political science and Abbott's in history and economics, students were expected to devote themselves to gaining an understanding of statutes and statute drafting, administrative law, the court system, and the economic principles as they applied themselves to questions of social insurance, workmen's compensation, the minimum wage, and family allowances. How else, Abbott asked, can social workers intelligently initiate, support, or reject programs of social reform? Acquiring knowledge about the history of social experimentation involving the lives of human beings was also of first-rate importance "So little do people know," Abbott said, "of the social reformers of the past and of their work that old experiments are wastefully repeated and outworn theories adopted."⁴⁴

Unlike most of the training schools for philanthropy, social research and social statistics were basic to the Chicago curriculum. Edith Abbott wanted every social worker to be able to give a competent reading to the statistical literature of the profession and to be able to deal critically with statistical arguments, which she said are "so often and, too frequently, so fallaciously, marshaled in support of some proposed measure of reform." She deplored instances when persons from other disciplines who did not properly understand the purpose and methods of social work were called in to do "special surveys" because social workers were untrained in research and not expected to analyze and interpret their own data.⁴⁵ Advanced students were expected to engage in social research that could enrich the curriculum and contribute in practical ways to the solution of social problems in their respective localities. They were given unusual opportunities to learn firsthand about the problems of people in a great city, to talk with individuals in their tenement housing, and to identify the strengths of people as well as the ills that overcame those who could not maintain themselves in the rapidly growing industrial society. Students were thrust into a powerful learning situation as they worked under Abbott's and Breckinridge's direction to gather data and to analyze the processes at work in the city's institutions—the courts, the public schools, the jails and correctional institutions, and the hospitals. Much of students' learning stemmed from their

close observation of the exacting and creative way in which Abbott and Breckinridge conceptualized social investigation. Developing a doctoral program of study was a first order of business for Abbott and Breckinridge when they moved the old School of Civics and Philanthropy into the university. A Ph.D. degree in social work was first awarded to one of their students in 1924.

Edith Abbott thought that the provision of adequate fieldwork was the most difficult side of social work education. The great challenge that she saw was the necessity to make fieldwork truly educational. She deplored the confusion between fieldwork and inspection visits, seeing the latter as "purely observational and informational" from which the student gained none of the "actual experience in doing under expert supervision, which is the invaluable asset of properly organized field work"⁴⁶ She believed the question of credit for fieldwork in its somewhat unstandardized condition would pose the greatest barrier to university affiliation for most training schools.⁴⁷ She was equally concerned about the "farming out" of students to social agencies without adequate linkage to the academic side of the curriculum.⁴⁸ In an attempt to provide a rigorous and integrated learning experience, she moved to employ field instructors as full-time faculty members who supervised students in their agency placements and taught in the school's social treatment courses as well.

Much of the Chicago curriculum focused on what was closest to Edith Abbott's heart — "the great field of public welfare administration." Neither she nor her sister, Grace Abbott, ever fell prey to the legacy of suspicion of government welfare that Lubove found associated with the evolution of social work as a profession.⁴⁹ From the beginning of their careers, each was oriented toward the public services. Each was convinced that the great advances in social welfare must come from public rather than private agencies. Each was part of the social class of the Progressive Era that was continually preoccupied with social problems.⁵⁰ The Abbott sisters, as part of that class, were problem solvers who sought an understanding of the entire social system and a specialized expertise to deal with it. From Grace Abbott's position of leadership in the federal government's Children's Bureau and Edith Abbott's role in a great university, each was intent upon expanding and transmitting that expertise and integrating it into government action. Edith Abbott chided social work educators who continued to envelop themselves in the affairs of long-established voluntary social work agencies and resisted the development of public services. "Are we building on the foundation [our first social workers] so wisely laid or have social workers become so concerned about casework methods and such phenomena as the *ego libido* and various psychiatric diagnoses and such exigencies as community chest financial campaigns that they have lost their sense of responsibility for this great division of public welfare that should be their professional concern?"⁵¹

Conclusions

The curricula of schools of social work today strongly reflect the broad outlook that Edith Abbott pioneered. Many of the principles about which she spoke and wrote are so generally accepted now that it would be easy to overlook the enormous contribution that she made to education for social work and to the social welfare system. When she and her close associate, Sophonisba Breckinridge, launched social work education within a university, the great developments in public welfare were yet to come. Most social work training schools, keenly preoccupied with casework narrowly defined and with fieldwork in voluntary agencies, still held a very narrow conception of professional education. Edith Abbott's advanced study in economics and in the history of legal and medical education, and her affiliation with the American Economic Association and the American Statistical Association, gave her a distinctly different perspective than that of other social work leaders of her day. Abbott and Breckinridge believed that they were engaged in a "great experiment" when they undertook to develop a wholly new pattern of professional education for social work.

Notes

Portions of this article are included in a manuscript entitled "Two Sisters for Social Justice: A Biography of Grace and Edith Abbott," to be published by the University of Illinois Press. The research was supported by grants from the Woods Charitable Fund and from the University of Illinois Research Board.

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3 Edith Abbott, "Education for Social Work," in *Report of the Commissioner of Education for the Year Ended June 30, 1915*, Department of Interior, Bureau of Education (Washington, D.C.: Government Printing Office, 1915), vol. 1, Jesse Frederick Steiner, *Education for Social Work* (Chicago: University of Chicago Press, 1921), pp. 6-8.

4 Anna L. Dawes, "Need of Training Schools for a New Profession," in *Sociology in Institutions of Learning*, ed. Amos G. Warner (Report of International Congress of Charities, Correction and Philanthropy, Chicago, 1893) (Baltimore: Johns Hopkins Press, 1893), pp. 14-20.

5 Mary E. Richmond, address given in Philadelphia, June 1897, cited in Steiner, p. 9.

6 Mary E. Richmond, "The Need of a Training School in Applied Philanthropy," in *Proceedings of the National Conference of Charities and Correction at the 24th Annual Session, Toronto, Ontario, July 7-14, 1897* (Boston: Geo. H. Ellis, 1898), pp. 181-88.

7 James H. Tufts, *Education and Training for Social Work* (New York: Russell Sage Foundation, 1923), pp. 111-20.

8 Jeffrey R. Brackett, *Supervision and Education in Charity* (New York: Macmillan Publishing Co., 1903), pp. 156-58, 162; Amos G. Warner, *American Charities: A Study in Philanthropy and Economics* (New York: Crowell, 1894).

9 Frank J. Bruno, *Trends in Social Work 1874-1956: A History Based on the Proceedings of the National Conference of Social Work* (New York: Columbia University Press, 1956), pp. 133-34.

10. Brackett, *Supervision and Education in Charity*, pp. 164-66.

11 Ibid., pp. 158-59.

12 Bruno, p. 134.

13 Brackett, *Supervision and Education in Charity*, p. 175; Bruno, p. 135.

14. Bruno, p. 7.

15 Ibid., p. 8.

16 Edith Abbott, *Social Welfare and Professional Education*, rev. ed. (Chicago: University of Chicago Press, 1942), pp. 131-73.

17 Carl C. Carstens was director of the Massachusetts Society for the Prevention of Cruelty to Children from 1907 until 1920, when he became the first director of the Child Welfare League of America, Inc. Kate Holladay Claghorn was on the faculty of the New York School of Social Work for over seventeen years, where she taught courses in principles and methods of social research and immigration. Carl Kelsey was a professor of sociology at the University of Pennsylvania for many years, and in addition was assistant director of the New York School of Philanthropy from 1903 to 1912. Frank Persons was a long-time member of the board of trustees of the New York School of Social Work. Paul U. Kellogg launched the social survey method with the *Pitt Survey*, a study of labor conditions in the steel industry. He served as editor of the *Survey* from 1912 until his retirement. Frances A. Kellor was a social investigator and reformer and an arbitration specialist. Porter R. Lee joined the faculty of the New York School of Philanthropy in 1912 and succeeded Edward T. Devine as its director five years later. His synthesis of ideas from other fields was highly influential in the development of the generic social casework theory at the 1929 Milford conference.

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19 Roy Lubove, *The Professional Altruist: The Emergence of Social Work as a Career, 1880-1930* (Cambridge, Mass.: Harvard University Press, 1968), pp. 137-41; Brackett, *Supervision and Education in Charity*, pp. 138-39.

20 Lubove, p. 142.

21 Abbott, "Education for Social Work," p. 349.

22 Steiner, pp. 14-20, quotes on pp. 17 and 25.

23 Abraham Flexner, "Is Social Work a Profession?" in *Proceedings of the National Conference of Charities and Correction, at the Forty Second Annual Session Held in Baltimore, Maryland, May 12-19, 1915* (Chicago: Hildmann Printing Co., 1915), pp. 576-90 (here cited as *Proceedings of the NCCC*).

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27 Abbott, *Twenty-one Years of Education for Social Service*, p. 3. Edith Abbott to Sydney Walker, January 25, 1937, letter supplied by School of Social Service Administration, University of Chicago.

28. Abbott, *Twenty-one Years of Education for Social Service*, pp. 676-77.

29 See, e.g., Edith Abbott to Sydney Walker, April 19, 1931, and Jan. 25, 1937, letters supplied by School of Social Service Administration, University of Chicago.

30 Rayman Solomon, "The Founding and Development of the Graduate School of Social Service Administration at the University of Chicago: A Study of Founding and Public Policy Research" (unpublished paper, May 1976, citing the following sources: Laura Spelman Rockefeller Memorial, *Memorial Policy in Social Science* [October, Beardsley Rummler Papers, Regenstein Library, University of Chicago]; Barry D. Charles E. Merriam and the Study of Politics [Chicago: University of Chicago, 1971], pp. 132-36, 150-52; Trevor Arnett to E. D. Burton, May 23, 1924, Presidential Papers, Regenstein Library, University of Chicago; Memorandum, Harold Swift to E. D. Burton, June 10, 1924, Swift Papers, Regenstein Library, University of Chicago; Ferris F. Swift to E. D. Burton, November 3, 1923; L. C. Marshall to E. D. Burton, November 9, 1923; and E. D. Burton's Memorandum of conversation with Harold Swift, June 10, 1924).

all in *Presidential Papers*, Harold Swift to E. D. Burton, June 13, 1924, and Harold Swift to Trevor Arnett, June 20, 1924, Swift Papers)

31 Lubove, p. 80.

32 Mary E. Richmond, "The Social Case Worker in a Changing World," in *Proceedings of the NCCC*, pp. 45-46

33 Lubove, p. 143

34 *Ibid.*, pp. 85-89

35 Jeffrey R. Brackett, "The Curriculum of the Professional School of Social Work," in *Proceedings of the NCCC*, p. 612

36 Porter R. Lee, "Committee Report: The Professional Basis of Social Work," in *Proceedings of the NCCC*, p. 603

37 *Ibid.*, Porter R. Lee, "Providing Teaching Materials," address delivered in 1920, in *Social Work as Cause and Function and Other Papers* (New York: Columbia University Press, 1937), pp. 79-82. Lee and Marion E. Kenworthy, *Mental Hygiene and Social Work* (New York: Commonwealth Fund, 1929), p. 215.

38 John Stuart Mill, *System of Logic: Ratiocinative and Inductive: Being a Connected View of the Principles of Evidence and the Methods of Scientific Investigation*, 8th ed. (New York: Harper & Bros., 1893), bk. 6, pp. 578-659

39 Edith Abbott, "Some Basic Principles in Professional Education for Social Work" (an address delivered at the National Conference of Social Work before a joint session of the Association of Schools of Professional Work, the American Association of Social Workers, and the conference, Memphis, 1928), in Abbott, *Social Welfare and Professional Education*, pp. 44-80, quotes on pp. 46-47.

40 *Ibid.*

41 Abbott, "The University and Social Welfare," in *Social Welfare and Professional Education*, pp. 12-13

42 Abbott, "Some Basic Principles," pp. 49-50

43 *Ibid.*, p. 80

44 *Ibid.*, p. 56.

45 *Ibid.*, p. 52

46 Abbott, "Education for Social Work," p. 356

47 *Ibid.*, pp. 351-59

48 Abbott, "Some Basic Principles," pp. 57-60

49 Lubove, pp. 52-54

50 Robert H. Wiebe, *The Search for Order 1877-1920* (New York: Hill & Wang, 1967); Robert L. Buroker, "From Voluntary Association to Welfare State: The Immigrants' Protective League, 1908-1926," *Journal of American History* 58, no. 3 (December 1971): 643-60.

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The Impact of the *Tarasoff* Decision on Clinical Social Work Practice

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The California Supreme Court's 1976 *Tarasoff* decision presents a standard of professional responsibility for mental health practitioners to act to protect potential victims of possibly violent clients. Results of a study investigating the impact of the *Tarasoff* decision on clinical practice in California indicate a clear recognition of professional responsibility to protect potential victims but reveal discrepancies between the respondents' beliefs and actions in their most recent cases involving possible violence to a third party. Practitioners place greater weight on professional and personal ethics than on legal mandates as the deciding factor in such cases.

Mental health and legal literature indicate considerable controversy regarding the existence, nature, and extent of therapists' responsibilities toward potential victims of violence by clients. The most prominent legal case of this kind, the California Supreme Court's *Tarasoff* decision, highlights issues that require the social work profession to clarify practice decisions and ethical and legal responsibilities. This case involves a murder that had been threatened in the presence of a therapist.

The *Tarasoff* Case and Supreme Court Findings

Case background.—On October 27, 1969, Prosenjit Poddar killed his former "girlfriend," Tatiana Tarasoff.¹ Poddar had been a client of a psychologist at Cowell Memorial Hospital at the University of California, Berkeley. While in treatment, he had revealed that he intended to purchase a gun and kill Tarasoff upon her return from summer vacation in Brazil. In consultation with the assistant director of the university's Department of Psychiatry and the clinician who had initially seen the client, the psychologist both telephoned and wrote campus police requesting their assistance in committing Poddar to a psychiatric hospital for observation under Section 5150 of the California Welfare and Institutions Code. The treating psychologist had diagnosed Poddar as an acute paranoid schizophrenic. When university police were summoned to assist, after questioning him at length, the officers decided that Poddar was rational. They released him after he promised to stay away from Tarasoff. When the director of the University Hospital Department of Psychiatry, who had been absent, returned shortly after this encounter, he determined that Poddar's right to confidentiality precluded further university hospital action or intervention outside the therapeutic setting.

Within a few weeks of Tarasoff's return, Poddar carried out his threat and shot Tarasoff with a pellet gun. When she fled from her home, he pursued her and stabbed her repeatedly with a kitchen knife. She died in the street from the knife wounds.

Supreme Court decisions.—Tarasoff's parents filed a wrongful death action suit in the California courts naming the therapists, the campus police, and the regents of the University of California as defendants on two grounds: (1) that they failed to warn Tatiana or her parents that she was in danger, and (2) that they failed to confine Poddar. Following litigation in the lower courts, which held for the defendants, the Tarasoffs appealed to the California Supreme Court seeking a reversal. In 1974, the court ruled that causes for action might be found against both the therapists and the police for their "failure to warn" Tatiana and her parents about the danger she faced.² That decision ruled with regard to the therapists that: (1) When a doctor or a psychotherapist, in the exercise of his professional skill and knowledge, determines, or should determine, that a warning is essential to avert danger arising from the medical or psychological condition of his patient, he incurs a legal obligation to give that warning; and (2) if a defendant's prior conduct had created or contributed to a danger, even if that conduct itself is nonnegligent, the defendant bears a duty to warn affected persons of such impending danger.³ This finding produced active protest from various professional groups, and after

considerable controversy the California Supreme Court agreed to rehear the wrongful-death action. On July 1, 1976, the court handed down its second decision on *Tarasoff*, which vacated the earlier finding.⁴

Major findings of the 1976 decision (1) affirmed the lower court's ruling that there was no cause for action against the police; (2) rejected the plaintiff's claim for action against the therapist and regents regarding failure to confine Poddar on the basis that the therapists had immunity under California Government Code Section 856 and were not designees of Section 5150 of the California Welfare and Institutions Code able to effect an involuntary commitment to a psychiatric hospital; and (3) held that there could be a cause for action on the ground that the therapists "failed to exercise reasonable care" to protect Tatiana from danger.⁵

The existence of two *Tarasoff* decisions has caused considerable misunderstanding and has spawned a lively literature in legal and mental health journals focusing on the tensions between clients' rights to confidentiality and the public's and potential victim's rights to protection. The holdings in both decisions establish a responsibility for therapists to act to protect potential victims of dangerous clients but differ in the extent and specificity of the responsibility.

The crucial difference between the decisions regarding the therapist's legal responsibility is the change in language from the 1974 "duty to warn" to the broader and more general 1976 statement:

When a therapist determines, or pursuant to the standards of his profession should determine, that his patient presents a serious danger of violence to another, he incurs an obligation to use reasonable care to protect the intended victim against such danger. The discharge of this duty may require the therapist to take one or more of various steps, depending upon the nature of the case. Thus it may call for him to warn the intended victim or others likely to apprise the victim of the danger, to notify the police, or to take whatever other steps are reasonably necessary under the circumstances.⁶

The 1976 decision thus sets out a case law standard by which to evaluate legal liability of therapists. It is a broader guideline that indicates the need to warn possible victims in the exercise of reasonable care but stops short of mandating a "duty to warn."⁷ Interestingly, after the case was remanded to the lower courts for further proceedings, it was settled out of court so that no actual liability was established.⁸

Ethical issues and practice decisions.—The definitive *Tarasoff* decision (1976) thus clearly raises ethical and legal concerns for clinical social work practice. In California, Licensed Clinical Social Workers (LCSWs) are included in the statutory definition of psychotherapist, and thus LCSWs are bound by the case law handed down in the *Tarasoff* decision. This California Supreme Court decision, although controversial, has

already affected subsequent court decisions in California and other states. However, little is known about the impact of the *Tarasoff* decision on mental health practice. While the NASW Code of Ethics discusses the protection of clients through professional confidentiality, the code is not specific about a duty to warn potential victims of violent crimes. Section II in the 1980 revision of the code relating to confidentiality states: "The social worker should respect the privacy of clients and hold in confidence all information obtained in the course of professional services." And further: "(1) The social worker should share with others confidences revealed by clients, without their consent, only for compelling professional reasons. (2) The social worker should inform clients fully about the limits of confidentiality in a given situation, the purposes for which the information is obtained, and how it may be used."⁹ The statements do not address the issues of danger to potential victims, and the absence of a clear definition of "compelling professional reasons" might be interpreted as a very strict protection of client confidentiality over the rights of potential victims and the profession's duty to society.¹⁰

Such a "strict constructionist" view of confidentiality might seem designed to protect clients and the sanctity of the therapeutic relationship through privileged communication which is a legally protected confidence. However, this limited view would deny social work's roots in social intervention. Whether one traces one's roots to Mary Richmond, Mary Parker Follett, or Jane Addams, or whether one holds to the Charity Organization Society or Settlement House tradition in social work, our professional forebears were unanimous in their definition of the profession as grounded in equal responsibility to clients and community. Within this coherent tradition, failure on the part of a social worker to act to protect or to warn a potential victim of an assault threatened by a client constitutes a potentially criminal act and social negligence.

It might be argued that traditional social work ethics assure societal intervention to prevent a client from harming someone else and thereby also further harming himself. However, there is a dearth of research on this issue and on the legal and practice implications of the *Tarasoff* decision. Clearly, when a client threatens the life of another person, practitioners must make critical decisions regarding what actions are necessary to effect reasonable care to protect intended victims, including (1) whether to warn potential victims, (2) what effect the warning would have on the therapeutic relationship and whether to discuss the warning with the client, (3) how to warn the potential victim(s), (4) whether to contact law enforcement agencies, or (5) whether to initiate hospitalization. Related questions occur with regard to the ethics of handling such a threat and the ability or inability of the therapist to make an accurate judgment as to the seriousness of the threat or the danger the client constitutes.

To date, only one empirical study of the impact of the *Tarasoff* decision has been published.¹¹ That research was undertaken in the year following the 1976 final decision and surveyed a professionally mixed sample of California psychotherapists. The study indicated that after the decision, respondents were more likely to seek the counsel of other professionals, either other psychotherapists or lawyers, when issues related to violence, threats, or danger arose with their clients. Also, after the decision respondents were more likely to take steps to protect potential victims, although nearly one-half had taken steps to warn potential victims prior to the *Tarasoff* decision.¹²

While this first study acknowledged methodological problems and produced rather tentative results, it clearly caused tensions to surface between ethical professional behavior and behavior legally mandated for psychotherapists in California. A number of other articles have since been published in legal and mental health journals expressing a variety of positions about the decision, but only one national study has so far been undertaken. Researchers at Northeastern University are currently engaged in an interdisciplinary study of mental health practitioners.¹³

To investigate the impact of the *Tarasoff* decision on clinical social workers practicing in California, we undertook a study in 1981 of a sample of California Licensed Clinical Social Workers.

The Impact of the *Tarasoff* Decision on Clinical Practice

Study design.—Following an intensive review of the relevant literature, the research group developed a survey questionnaire designed to discover the impact of the *Tarasoff* decision on clinical social work practice. Questionnaire sections included: (1) demographic data and practice experience, (2) perceptions about privileged communication and confidentiality, (3) perceptions about professional and legal responsibilities toward potential victims of potentially dangerous clients, (4) perceptions about prediction of dangerousness and experience with dangerous clients, and (5) knowledge about and understanding of the *Tarasoff* decision. The Northeastern research team, Bowers and Givelber, graciously permitted modification and the use of some items from their questionnaire for the present study.¹⁴

The survey questionnaire was mailed to a random sample of social workers drawn from the 1980 California roster of LCSWs. The response of eighty-one practitioners represents one-third of the sample. The questionnaire included Likert-type scales, Thurstone items, multiple-

and single-choice response answers, agree-disagree items, and items to be filled in by the respondent. The data were analyzed using frequency counts and cross-tabulations.

This paper reports highlights of the study focusing on respondents' knowledge of the *Tarasoff* decision, their attitudes about major practice issues related to the decision, and their actions in practice situations involving a threat toward another person by a client.

Findings

Description of sample.—All respondents were Licensed Clinical Social Workers. Of the eighty-one respondents, two-thirds (66.7 percent) received their M.S.W. degrees in the 1960s and 1970s. The majority of the sample were between thirty-six and fifty-five years of age, with 42 percent in the thirty-six to forty-five age category. Fifty-nine percent were women and 41 percent men. Ethnically, the sample broke down as follows: Anglo 86.4 percent, black 7.4 percent, Hispanic 3.7 percent, and Asian/Pacific 2.5 percent. The majority of respondents (55.6 percent) completed their degrees in California, and 51 percent had obtained other graduate degrees or licenses—predominantly marriage and family counseling licensure.

Respondents identified their primary work setting as: mental health settings 42.4 percent; medical settings 9 percent; public social services 51 percent; schools 3.8 percent; university settings 2.6 percent; private practice 24.4 percent; part time 5.1 percent; unemployed 2.6 percent; and other 5 percent. Most respondents adopted a psychodynamic approach to practice, ranking their primary treatment orientations as ego psychology (20 percent), psychoanalytic (17.1 percent), family therapy and Rogerian approaches (each 11.4 percent), and crisis intervention (8.6 percent).

Professional responsibility.—Over three-quarters of the LCSWs sampled (78 percent) felt that it is a professional responsibility to protect others from potential violence by a client when the therapist believes there is a serious possibility that the client will follow through with the threat. A threat alone, however, was not viewed as sufficient to merit protective action, since 77 percent felt that there was not a professional responsibility whenever a threat was made. This difference seems to indicate that those sampled felt a responsibility to exercise professional judgment, that is, to evaluate the threat and the potentiality of violence before taking action. Where the therapist had discussed limits of confidentiality with the client and believed the threat to be serious, 91 percent stated that there was a professional responsibility to protect

potential victims. All of those surveyed felt it was a professional responsibility to protect others regardless of circumstances; in fact, 68.4 percent of the sample stated that warning a potential victim of violence was essential for social work practice.

When asked what actions would be part of their professional responsibility if one of their clients threatened harm to a third party, the largest group of respondents (73.4 percent) believed that they would deal with the issue in continued therapy (see table 1). Seventy and nine-tenths percent stated that they would notify their superiors. In answers that reflect ideas in the *Tarasoff* decision, 71.1 percent believed that they would warn the potential victim and 67.9 percent believed that they would exercise reasonable care to protect the potential victim. The majority of responses (65 percent and above) indicated a recognized responsibility to client, to potential victim, and to agency. Two-thirds of the sample thus had a perception of professional responsibility to potential victims of violent clients that is congruent with the holdings of the *Tarasoff* decision, yet their responses about confidentiality and actions in particular cases belied this sense of responsibility.

Confidentiality.—Much of the controversy over the *Tarasoff* decision hinges on interpretations of confidentiality. Reservations about violating confidentiality, even when a third party is endangered, frequently stem from a view that acting to protect a potential victim (i.e., violating confidentiality by warning or other actions) will jeopardize the therapeutic process. Confidentiality is frequently taken to be a cardinal principle of professional practice and, in this study, 97.5 percent of the respondents agreed that confidentiality is a crucial aspect of the therapeutic process.

While the LCSWs may honor confidentiality in practice, their responses suggest that they have reservations about actually discussing

Table 1

SOCIAL WORKERS' PERCEPTIONS OF PROFESSIONAL RESPONSIBILITIES WITH POTENTIALLY DANGEROUS CLIENTS

COURSE OF ACTION TO TAKE	Yes		No	
	%	N	%	N
Deal with potential violence in therapy	73.4	58	26.6	21
Warn the potential victim	71.1	54	28.9	22
Notify agency supervisors	70.9	56	29.1	23
Use reasonable care to protect the potential victim	67.9	53	32.1	25
Seek emergency voluntary hospitalization	53.3	40	46.7	35
Seek professional consultation	51.9	40	48.1	37
Call the police	47.4	36	52.6	40
Warn a potential victim's family	37.7	29	62.3	48
Other	14.7	14	80.3	57
Don't know	2.7	2	95.9	70
Take no action	0	0	100	71

the issue with their clients. When asked about their behavior in explicitly discussing confidentiality with clients, slightly more than one-half of the respondents stated that they normally discuss confidentiality at the outset of treatment. Another third stated that they "sometimes" discuss confidentiality "if it is an issue in therapy," but less than 6 percent of the respondents stated that they always make it a point to discuss confidentiality.

Some reservations were also indicated by responses about discussion of limitations of confidentiality with clients. When asked whether a statement to a client regarding the possible disclosure of information greatly jeopardized the therapeutic process, 38.7 percent agreed that it would, while 47.5 percent felt that such a discussion would not jeopardize treatment (13.7 percent were indifferent). In response to the statement, "Patients/clients should be advised of limits in maintaining confidentiality within a therapeutic setting," over half strongly agreed with the statement, and another third agreed (total in agreement, 83.8 percent). Five percent were indifferent, and 11.1 percent disagreed with the statement. Although respondents supported the idea of advising clients on the limits of confidentiality, their responses regarding their behavior do not bear out that this belief is consistently acted upon. It may be that concern about jeopardizing the therapeutic process or other reasons inhibit behavior in discussing confidentiality as an integral part of treatment.

Another major aspect of confidentiality related to the *Tarasoff* decision deals with reasons for and attitudes toward disclosing information given by a client particularly when a third party is endangered. With regard to the circumstances under which confidential information may be or should be disclosed, three-quarters (76.9 percent) of the sampled LCSWs believed that protection of society's individuals was much more important than maintaining strict confidentiality with a dangerous client. Only 6.3 percent of those sampled believed that confidentiality must be upheld between a therapist and client despite any circumstances. Less than one-quarter (22.3 percent) thought that warning a potential victim of violence should be left up to each individual LCSW and should not be mandated. Forty and nine-tenths percent believed that only when a client was homicidal or suicidal should an LCSW disclose confidential information, while 57.1 percent disagreed with this statement. Just over two-thirds of the LCSWs (68.5 percent) thought that there was legal requirement to notify people threatened by a client thought to be dangerous.¹⁵

Particular cases.—To examine actual experiences with dangerous clients and to enable comparisons of attitudes and behavior, respondents were asked about their most recent experience with a client they believed to be dangerous. One-quarter of the sample had never served a client that they believed likely to harm another person. Fifty-nine LCSWs

who had worked with potentially dangerous clients reported on experiences occurring from 1968 to 1981; twenty respondents reported experiences occurring in 1980. Twenty-two of the cases had been dealt with in mental health agencies (private and public facilities) and twenty-three had occurred in private practice. Three such cases had been dealt with in health settings and eleven in other settings.

In describing these cases, practitioners reported that 71.9 percent of the dangerous clients were male. Just over one-third (36.7 percent) were aged nineteen to thirty years, and another third were thirty-one to forty years. In response to questions about how long these clients had been in treatment, the LCSWs reported that 41.7 percent had been in treatment less than one month, 30 percent between one and six months, 16.7 percent between seven months and one year, and 8.3 percent had been in treatment more than one year when they threatened to harm someone.

The social workers reported that in their most recent such case they found the following: 44.8 percent of the clients had made an implicit threat and 53.4 percent an explicit threat. In forty-one of the cases, a potential victim was identified, and in eleven cases the client had a detailed plan to carry out the threat. Fourteen clients mentioned an available weapon. In thirteen cases (24.5 percent), the threats consisted of content that did not identify a specific victim, detail a plan, or mention a weapon.

Twenty-seven respondents described the nature of the threat. Six clients had threatened to kill a relative, and eight clients had threatened to kill a nonrelative. Another eight clients had threatened to attack a relative or spouse with a weapon. In five cases, the LCSWs felt that their client had implied a threat by behavior.

In response to the social workers' judgment that their client was potentially harmful to others, the LCSWs took a variety of actions singly or in combination. One action that was frequently taken was to consult with other professionals. Forty-nine percent of the LCSWs sought advice from a psychiatrist, 40.7 percent from another social worker, 28.8 percent from their supervisor, 25 percent from their administrators, and 21 percent from a psychologist. Six and nine-tenths percent sought advice from lawyers, 13.5 percent from other sources, and 16.4 percent sought no advice. In addition, almost two-thirds included a note in the client's record indicating a possibility of violent behavior (65.4 percent).

With responses from thirty-eight LCSWs, it was found that the actual victim was the person initially identified as a potential victim by the client in seventeen cases (44.7 percent). In twelve cases (31.6 percent), the victim was not the same person, and in nine cases (23.7 percent) the LCSW did not know.

While the reported number of cases is small, these examples clearly illustrate that it is not unusual for social workers in a variety of settings

to encounter clients potentially dangerous to third parties and who make threats of harm in the therapeutic setting. Thus, the problem of danger to third parties is a problem for the profession. This reality indicates a need for professional judgment and understanding of legal responsibilities in dealing with situations such as that in the *Tarasoff* decision.

Knowledge of and response to the Tarasoff decision.—Returning to the total sample of eighty-one LCSWs, all respondents were asked a series of questions about the *Tarasoff* decision. Sixty-eight and five-tenths percent stated that they had heard of this court decision, 20.5 percent had heard of such a case dealing with therapists' responsibility toward potential victims but did not recognize the exact name, and 11 percent of the sample said they had never heard of the *Tarasoff* decision. Thus, 89 percent of the respondents claimed to be knowledgeable about the court decision in the *Tarasoff* case.

In response to the question, "How does your present response to clients who might physically harm others compare to your response five years ago?" 60.2 percent of the LCSWs stated that their actions with regard to notification of potential victims were about the same as five years ago. Five and eight-tenths percent stated that they were less likely to notify potential victims, and 33.8 percent said that they were now more likely to notify potential victims. Over half the sample, therefore, did not think that their behavior had changed, while one-third are now more likely to act to warn a third party. This one-third has directly experienced the impact of the *Tarasoff* decision and identifies it as a factor in their practice.

When this sample of LCSWs was asked what reasons justify professional action and responsibility when a client threatens to harm a third party, personal ethics were stated to be the strongest guide. Sixty-nine and nine-tenths percent (fifty-one) stated that personal ethics would guide their actions justifying professional responsibility. Fifty-eight and nine-tenths percent (forty-three) stated that professional ethics would be their primary reason justifying professional responsibility. Forty-seven and one-tenth percent stated that the *Tarasoff* decision applies to social work, 36.6 percent stated that other laws (i.e., the licensing law) required professional responsibility, 36.2 percent stated that the *Tarasoff* decision applied where they worked, and 8.1 percent cited other reasons.

This sample, then, generally affirmed the principle of professional responsibility to act with reasonable care to protect third parties but held that their reasons related most strongly to personal and professional ethics. While this sample may well be self-selected (i.e., knowledgeable about and generally in agreement with the mandate of *Tarasoff*), they subscribe to a view of personal and professional ethics that requires action to protect potential victims of violent clients rather than compliance with a legal mandate.

There are problems, however, in the response sets that indicate inconsistencies among attitudes, knowledge, and behavior. Cross-tabulations examining understanding of the *Tarasoff* decision and actions of the LCSWs in their own practice reveal some interesting discrepancies. For example, in comparing understanding of the *Tarasoff* decision with actions now and five years ago with regard to notifying potential victims, responses indicate that forty-four LCSWs in the sample understood the standard of professional conduct set in the *Tarasoff* decision, while twenty did not. Of those who understood the decision, twenty-eight (43.8 percent) said that their actions were about the same as five years ago, while sixteen (25 percent) said that they were more likely now to notify a potential victim. However, when analysis of another item was done also examining those LCSWs who understood the *Tarasoff* decision, responses indicated that even when this group (thirty respondents on this item) believed a threat to be serious, only one-third (eight) did not take this or any other protective action. These responses indicate the differences between the respondents' stated beliefs and their own actions.

These discrepancies raise questions about the willingness or commitment of clinical social workers to act on the beliefs that they affirmed as part of their personal and professional ethics. The study results also raise questions about the willingness or commitment of clinicians to comply with an understood legal mandate to protect third parties from potentially dangerous clients. If this sample accurately reflects general feeling within the profession regarding a preference to base actions to protect third parties on professional and personal ethics rather than on compliance with the law, then there is need for action within the professional community to clarify this area of responsibility.

Conclusions

The sample of eighty-one California LCSWs studied seems to be more knowledgeable about the *Tarasoff* decision than previous samples have been.¹⁶ It seems quite likely that the third of the population sampled that responded did so because of knowledge of or interest in the case. The sample might be viewed as biased with regard to knowledge of the case. Given the media publicity regarding this California Supreme Court decision, it might be expected that California social workers are more knowledgeable about this case than is a national sample. The demographic variables indicate that the sample is a reasonably accurate reflection of the LCSW population in California. Therefore, despite the relatively small size of the sample, some generalizations can be drawn.

The study suggests that respondents have a clear conception of professional responsibility to exercise reasonable care to protect potential victims of violent clients. The responses citing personal and professional ethics as the principle guides in determining responses to threats to third parties are congruent with the expressions of personal responsibility. The sample members claimed considerable knowledge about the legal standard set by the *Tarasoff* decision that agreed with their perceptions of professional responsibility. They stated overwhelmingly that action to protect potential victims should not be based simply on individual choice. But despite their knowledge of the potential liability for failure to exercise reasonable care to protect potential victims and their conviction that professional and personal ethics support and precede such a responsibility, their actions on cases did not support these principles of professional behavior.

In a number of articles in the earlier literature, authors argue that warnings are a peculiarly professional area and should not be subject to legislation. It is important, however, to recall that society sanctions all professions and does so because of the inherent dependency of clients on professional insight. The possession of special knowledge in the field of mental health carries the obligation to use it for society's benefit. This tension between society and the individual is the subject of the *Tarasoff* decision, and as an area of professional ethics should be more carefully studied. If this sample reflects general views, it is incumbent on the profession to take a more serious look at issues of threat to third parties.

While both *Tarasoff* decisions have sparked controversy, the authors hold that the binding 1976 decision does not impinge on professional rights but rather articulates the original nature of the relationship between professions and the society that sanctions them. In its standard to exercise reasonable care to protect potential victims, the *Tarasoff* decision presents a principle that should be more clearly enunciated in the Code of Ethics of the National Association of Social Workers. The *Tarasoff* decision is an instance of good law supporting responsible professional practice.

Respondents in this study supported the idea of the need for more guidance in the NASW Code of Ethics with regard to professional responsibility for action to protect potential victims of violent clients. Sixty-four and one-tenth percent believed that the present code was not a viable guide on this problematic issue, and 82 percent of the sample believed that the code needed to be revised to be more responsive to practitioners' legal responsibilities.

While the new NASW Code of Ethics acknowledges that social workers might have to reveal client confidences for "compelling professional reasons," it fails to articulate standards and guidelines for practice that relate to the need to protect potential victims—an obligation that should be equal to the responsibility to protect clients. Social work

must fulfill historical conceptions as grounded in duty to client an community and must further recognize the *Tarasoff* position that "th protective privilege ends where the public peril begins."¹⁷

Almost two-thirds of the sample report that their practice in th matter is similar pre- and post-*Tarasoff*, but their actions in most recer cases do not support the belief system that they claim requires ther to act to protect third parties. This discrepancy poses serious ethic issues for the professional community.

Notes

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1. *Tarasoff v. Regents of the University of California*, 13 Cal. 3rd 117, 529, P 2d 55' 118 Cal. Rptr. 129 (1974) (*Tarasoff I*).

2. *Ibid*.

3. *Ibid*.

4. *Tarasoff v. Regents of the University of California*, 17 Cal. 3rd 425, 551, P 2d 33' 131 Cal. Rptr. 14 (1976) (*Tarasoff II*).

5. *Ibid*.

6. *Ibid*, p. 3.

7. Marvin Lafoya Southard and Bruce Gross, *Clients, Therapists and Third Parties Making Decisions after Tarasoff*, El Centro Research and Policy Institute Monograph no 1 (available from 972 Goodrich Boulevard, Los Angeles, California 90022).

8. *Ibid*, p. 3.

9. *National Association of Social Workers, Code of Ethics* (Washington, D. C.: NASW, 1980).

10. Sandra S. Abney, James A. Cook, Diane Haring, Wendy Hawkins, Carolyn Paine Ernest Sanchez, and William B. Stanley, "The Impact of the *Tarasoff* Decision o California Licensed Clinical Social Workers" (Master's thesis, University of Souther California, School of Social Work, May 1981), pp. 49-50.

11. Toni Pryor Wise, "Where the Public Peril Begins: A Survey of Psychotherapis to Determine the Effects of *Tarasoff*," *Stanford Law Review* 31 (November 1978): 165-90.

12. *Ibid*.

13. Daniel J. Givelber, Northeastern University School of Law, personal telephon communication, October 31, 1980.

14. William Bowers and Daniel Givelber, "Tarasoff: Impact of Law on Mental Healt Practice" (research project being conducted through Northeastern University Schoo of Law, 1980-83).

15. Table 1 presents items adapted from the Bowers and Givelber survey instrumen.

16. Wise, p. 121, and Daniel Givelber, personal communication, January 1981.

17. *Tarasoff II*, p. 24.

Notes on Policy and Practice

Income Support Programs for Disabled Women

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Public income support programs for the disabled are currently undergoing scrutiny and experiencing changes that are likely to reduce disproportionately the access of impaired women to disability-related benefits. This paper examines women's eligibility for and receipt of disability-related transfer income. The likely impact of recently proposed or enacted changes in Disability Insurance and Supplemental Security Income is estimated.

Public income support and rehabilitation programs aimed at the disabled are receiving increased scrutiny of late as part of the effort to trim the federal budget and maintain the solvency of the Social Security programs.¹ In particular, Social Security Disability Insurance and the Supplemental Security Income Program are facing changes in policy and budget due to accusations that many nondisabled persons receive their benefits. Another reason for the growing focus on programs serving the disabled is the awareness that as the size of the aged population increases, so will the number of persons experiencing limiting impairments.

Up to this point, most of the research on the needs, characteristics, and determinants of disability in adults has focused on men. This bias is, in part, a result of the large role the Social Security Administration

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has played in sponsoring, executing, and providing data on the disabled. Since the majority of Social Security Disability recipients are men, the focus on their program population is understandable. As a result, however, there is a paucity of research on the economic circumstances of disabled women.

There are two reasons to be interested in the impact of disability on women. First, there are repeated findings that women report more disability and more severe disability than men.² Second, because the growing aged population is disproportionately female and the incidence of disability increases with age, many disabled persons are currently older women and will remain so in the future.

The purpose of this paper is to describe the economic circumstances of disabled women, especially those who are not married. Women's dependency on income support program benefits will be assessed. Finally, since reforms that will restrict the availability of Disability Insurance and Supplemental Security Income are being contemplated or have recently been enacted, the impact of these changes on disabled women will be considered. In particular, we will examine the likely effects of recent amendments to the Social Security Act and the proposals to restrict replacement rates, eliminate minimum benefits, and tighten disability criteria.

The statistics cited in the text and the tables that follow are based on analysis of data from the 1972 Social Security Survey of Disabled and Non-Disabled Adults.³ This survey of 18,000 persons represents the noninstitutionalized population aged twenty to sixty-four in 1972.⁴ Although the survey is now ten years old, it is still one of the most complete sources of data on work, income, and disability characteristics. Categorization of the disabled is based on responses to a series of questions in the survey regarding the effect of impairments on work. Persons stating that they are limited in the kind or amount of work they can do (including housework for women who are full-time homemakers) are classified as disabled. Recovered persons are listed as previously disabled. The survey questions follow the definition of disability described in Nagi which distinguishes between impairment and disability.⁵

Economic Circumstances of Disabled Women

Disability affects the economic circumstances of all households. Several studies have documented the loss of income that households experience when the head becomes disabled.⁶ The impact of disability on income is especially severe if the disabled household head is a woman. In

Table 1

INCOME SOURCES OF DISABLED AND NONDISABLED WOMEN AGED THIRTY-FIVE TO SIXTY-FOUR BY MARITAL STATUS, 1971

	CURRENTLY DISABLED		PREVIOUSLY DISABLED		NEVER DISABLED	
	Married	Nonmarried	Married	Nonmarried	Married	Nonmarried
Source of income						
Mean % income from transfers	19.9	42.8	7.2	16.1	6.4	13.0
Mean % income from own wages	8.0	19.6	17.5	53.0	16.8	57.1
Mean % income from spouse's wages	57.4	N.A.	63.4	N.A.	64.2	N.A.
Mean % income from miscellaneous sources	14.2	37.6	11.9	30.9	12.6	29.9
Total	100.0	100.0	100.0	100.0	100.0	100.0
Mean transfer income (\$)	963	1,276	434	808	431	611
Mean wage income (\$)	923	998	3,586	4,612	2,238	4,233
Mean total income (\$)	10,205	4,748	14,446	8,219	13,726	7,572
	(1,006)	(181)	(495)	(128)	(3,924)	(1,039)

SOURCE.—Weighted data from the 1972 Survey of Disabled and Non-disabled Adults

NOTE.—Numbers in parentheses are unweighted n's

1972, approximately 1.2 million nonmarried disabled women had come below the poverty line. Households headed by nonmarried disabled women are on average the poorest of all households.⁷

Table 1 displays the mean income and the relative share of different sources of income for disabled and nondisabled women by marital status. This table confirms that in addition to marital status, being disabled strongly affects the income of women. Table 1 also documents the extent to which disabled women are dependent upon income transfers and the greater income vulnerability of nonmarried disabled women.

Married disabled women depend largely on their husbands for income. The wages of husbands account for 57 percent of household income on average. Nonmarried disabled women, whose own wages are slightly higher than those of married women, depend largely on transfers from miscellaneous sources of income. Despite their greater reliance on transfers, nonmarried disabled women average only \$300 a year more from this source than married women. The reason for this near equality in the amount of transfers is the predominance of wage-related payments among disability benefits. The miscellaneous sources of income account for 38 percent of the annual income of nonmarried disabled women. By contrast, the proportion is 14 percent for married women. Miscellaneous income may come from such sources as contributions from relatives, the earnings of grown children, earnings from investments, and insurance settlements. What is significant about the large role of miscellaneous income in the support of disabled women is that it suggests that a large part of their annual income is unreliable and highly variable.

The economic picture that these statistics sketch suggests that income support programs are an important component of the income of disabled women, especially the nonmarried. Little is known, however, about the ways in which disabled women become eligible for transfer income or the probable effect of reforms that tie benefits more closely to wages and the length of labor force attachment. In the next section, we will examine the extent to which disabled women are currently eligible for various income transfer programs and estimate the number of women likely to be affected by the recently proposed and enacted reforms of income support programs for the disabled.

Income Support Programs

The income transfer programs upon which disabled women depend are Social Security Disability Insurance (DI), Government Employment Disability Insurance, Veteran's Compensation, Supplemental Security

Income (SSI, which replaced Aid to the Blind, Old Age Assistance, and Aid to the Permanently and Totally Disabled in 1974), Aid to Families with Dependent Children (AFDC), and private disability pensions. The percentage of disabled women receiving benefits from various income support programs in 1971 is displayed in table 2.

With the exception of the income-tested programs, the main sources of disability transfers are wage-replacement benefits. Because not all women work or work continuously, few are eligible for those wage-related benefit programs upon disability.

Social security benefits are received by a larger number of households of disabled women than are any other benefits. Women may be Social Security beneficiaries in their own right as disabled wage earners or as dependent spouses, widows, or widowed mothers. Of the disabled women who were Social Security beneficiaries in 1971, 22 percent were Disability Insurance beneficiaries in their own right, while most (46 percent) received Social Security benefits as spouses or survivors.⁸ These women were approximately 5 percent of women aged thirty-five to sixty-four.

Despite the claim that nearly 95 percent of all nongovernmental workers are in employment covered by Social Security, the survey data indicate that only one-third of married women and one-half of non-married women have Disability Insurance coverage. The proportion of women covered for Disability Insurance among currently disabled women, both married and nonmarried, is much lower. One-quarter of disabled married women and one-third of disabled nonmarried

Table 2

PERCENT OF DISABLED WOMEN WHOSE HOUSEHOLDS RECEIVE ANY INCOME FROM SELECTED TRANSFERS, 1971

SOURCE OF INCOME	MARITAL STATUS	
	Married	Not Married
Social Security (OASDI)	25.4	38.0
Government retirement or disability pension	4.7	4.2
Workmen's Compensation	2.9	1.4
Unemployment Compensation	4.4	2.0
Veteran's Payments	7.3	10.2
Private pension benefits	6.7	5.9
Aid to Families with Dependent Children (AFDC)	1.6	7.1
Aid to the Blind or Aid to the Permanently and Totally Disabled*	2.3	15.0
Other public assistance	2.9	9.4
	(1,006)	(481)

SOURCE —Weighted data from the 1972 Survey of Disabled and Non-disabled Adults

NOTE —Numbers in parentheses are unweighted n's

* The programs AB and APTD preceded SSI. They served approximately the same population as that now served by SSI.

Table 3

SOCIAL SECURITY DISABILITY INSURANCE COVERAGE BY MARITAL STATUS AND DISABILITY STATUS, 1972

COVERAGE STATUS	CURRENTLY DISABLED		PREVIOUSLY DISABLED		NEVER DISABLED	
	Married	Not Married	Married	Not Married	Married	Not Married
DI coverage	26.0	34.8	43.2	50.8	34.6	58.4
No DI coverage	74.0	65.2	56.8	49.2	65.4	41.6
Total	100.0 (952)	100.0 (408)	100.0 (491)	100.0 (124)	100.0 (3,795)	100.0 (933)

SOURCE — Weighted data from the 1972 Survey of Disabled and Non-disabled Adults.

NOTE — Numbers in parentheses are unweighted n's.

women were covered for DI in 1972 (see table 3). The relatively low proportion of women covered for Social Security and the even lower proportions receiving benefits from the other wage-replacement programs result from the lower labor force participation rate of women, the past exclusion from coverage of many sources of women's employment (domestic work, part-time waitressing, and sales clerking) and policies that include women's years out of the labor force for child rearing as years available for paid employment when estimating eligibility based on labor force attachment.

Few descriptions of the characteristics of disabled public assistance recipients are available. However, the data from the Survey of Disabled and Non-Disabled Adults show that in 1971 less than 4 percent of nonaged women received assistance from Aid to the Blind (AB) or Aid to the Permanently and Totally Disabled (APTD). The proportion of nonmarried women receiving AB or APTD was much higher (15 percent), ranking AB/APTD second among the sources of income support utilized by nonmarried disabled women. Since these programs were incorporated into SSI, no analysis of the disabled receiving benefits by sex has been published. Thus it is not possible to judge whether a larger proportion of low-income disabled women are supported by public assistance.

The Impact of Reforms in Disability Programs

Income support programs that serve the disabled have recently been the object of study and concern. In response to this, the 1980 amendments to the Social Security Act were passed, and additional reforms

which include eliminating minimum benefits and restricting replacement rates, have been or are being considered for enactment.⁹ Most of these proposals are aimed at the DI and SSI programs, although veterans' benefits and Workmen's Compensation have also received some attention.

The Disability Insurance program has been accused of overgenerosity and lax administration. Critics have argued that disability benefits replace too high a percentage of predisability gross earnings, and that because reassessments of beneficiaries are infrequent, benefits continue to be received even after recovery has occurred.¹⁰ Finally, the initial disability-determination standards have been questioned because their interpretation varies widely from state to state and between the state and federal agencies. The response to these criticisms has been a series of restrictions—some already enacted into law and others still under study.

In addition to restrictions, some modifications in Social Security that would enlarge the population covered for disability have also been discussed.¹¹ One aim of these proposals has been to ensure that women who are full-time homemakers or who have intermittent labor force participation would have income protection should they become disabled. These proposals were under active investigation in the Carter administration. So far they have not been a part of the Reagan administration's proposals for Social Security.

The Supplemental Security Income program has also been accused of lax administration. The number of disabled SSI beneficiaries has been growing, while the number of aged recipients has been decreasing. While much of the decrease in aged SSI beneficiaries is the result of income ineligibility for SSI due to rapidly rising Old Age Survivors and Disability Insurance (OASDI) benefits, the disability standards for SSI have also been blamed. In addition to administrative tightening of the SSI program, two recent study commissions have recommended abolishing the assets test in SSI.¹² If this were enacted, persons with low income would not be ineligible for SSI due to the value of their personal and household goods.

All of these proposals, whether they liberalize or restrict income transfers for the disabled, affect disabled women. Women will be differentially affected because of the nature of their labor force participation and their generally low earnings and incomes. Using the 1972 data, it is possible to make some rough estimates of the impact of these proposals.

Replacement rates.—The median replacement rate on gross earnings in 1971 of the DI benefits received by women workers was 44 percent.¹³ Only 15 percent of the women receiving DI had a replacement rate in excess of 66 percent; 8 percent had a replacement rate of 85 percent or more. At the other end, 38 percent of the women receiving DI as

disabled workers had a replacement rate below 40 percent. The replacement rates are from monthly benefits ranging from \$70 to \$211. Most women have relatively low replacement rates and low monthly benefit amounts. Altering the benefit formula to reduce replacement rates across the board would increase the number of women with replacement rates below 50 percent. The 1981 Omnibus Reconciliation and Budget Act did not reduce replacement rates but authorized the reduction of DI benefits for persons receiving disability benefits from several public programs so that total benefits do not exceed predisability net earnings after taxes.

Minimum benefits.—Elimination of the minimum Social Security benefit is another proposal which has attracted much attention. In 1981 Congress first eliminated and then later acted to restore the minimum benefit. The intent of the proposal to eliminate benefits is to prevent persons with government pensions from receiving a disproportionately large Social Security benefit because of a few years of covered employment. The elimination of the minimum benefit would mean that persons with long years of low wages would have to supplement their low Social Security benefits with SSI. The data from the 1972 survey indicate that approximately 12 percent of disabled women receiving DI would be affected by this policy. Unless elimination of the asset test for SSI eligibility accompanies elimination of the Social Security minimum benefit, not all of these women can be expected to be eligible for SSI. Thus, up to 49,000 disabled women with the lowest income may experience a net loss of income if minimum benefits are eliminated.

Recovery and work incentives.—The 1980 amendments to the Social Security Act attempted to facilitate the return to work of disabled and SSI beneficiaries by (a) continuing medical benefits even at termination of cash benefits, (b) excluding extraordinary work experience from earnings when determining continued eligibility, and (c) facilitating reentitlement for DI benefits should impairments again prevent employment. Further, the Department of Health and Human Services was authorized to mount demonstration projects to test the effectiveness of alternative policies to encourage employment among SSI and recipients.¹⁴

Analysis of the 1972 data suggests that these reforms may encourage some disabled women receiving benefits from these programs to seek and maintain employment. This may result because younger women in general have less severe impairments, and nearly all disabled women have had some experience in paid employment.

The number of women likely to be affected by these work incentives is difficult to estimate. In 1971, there were approximately 3.1 million disabled women between the ages of thirty-five and sixty-four who received Disability Insurance or disability-related public assistance payments. Two-thirds of these had limitations that impaired 25 percent or less of their functioning.¹⁵ Their impairments were mostly in

culoskeletal, cardiovascular, or respiratory, and a majority were troubled by pain, tired easily, and felt weak. Seventeen percent were in the labor force, although another 67 percent (who were not currently working) had work experience.

These statistics suggest that while recovery and employment may be difficult for the women who are currently receiving disability transfers, it should be possible to identify a group that is employable. Those with work experience and less severe impairments are most likely to respond to the work incentives, especially if they are relatively young and well educated. Analyses of successful rehabilitants show that these are important factors in reemployment after impairment; further, one's previous employer is the most likely source of postimpairment employment.¹⁶

Since the impairments that commonly afflict women are better managed than cured, the continuation of Medicare and Medicaid as authorized by the 1980 amendments is important. This provision maintains a disabled person's eligibility for medical benefits after termination of cash transfers and removes some of the risk associated with accepting employment. If a deterioration of health prohibits further employment, under the new law, restoration of disability benefits will no longer require a waiting period during which little or no income may be received.

Finally, if women can supplement their DI benefit with wage income (as in the case of the AFDC work incentives) instead of being forced to choose between wages or benefits, greater employment rates may occur. A study of the determinants of application for Disability Insurance found that women with impairments were more likely to withdraw from the labor force and apply for DI as the size of the benefit approached or exceeded their wages.¹⁷ Men, whose expected wages were generally much higher than their expected benefits, were not influenced by the size of the benefit but by factors such as pain, tiredness, weakness, age, and severity of impairment.

The 1980 amendments also allow deduction of work expenses from earned income before counting it against earnings under the Substantial Gainful Activity (SGA) test.¹⁸ While this is a reasonable and long overdue reform, it is unlikely to greatly affect employment rates. The disabled with extraordinary living costs for items such as attendants and highly modified environments are a minority among the disabled.¹⁹ The extension of medical insurance coverage is likely to have a much more significant impact since medical care costs are not only higher for the disabled but they have less access to independent medical insurance.²⁰ While it is possible that work incentives for the disabled might increase the labor force participation of disabled women, the employment of disabled women will not necessarily reduce their need for public income support. Seventeen percent of the women in this sample are both working and receiving disability transfers. Work incentives may only

increase this proportion because disabled women can anticipate low wages. Not only are women's wages approximately 59 percent of men's; the wages of impaired persons are approximately twenty-one cents an hour lower than the wages of similarly educated and skilled nonimpaired persons.²¹ Thus, while recovery and employment may be laudable and feasible goals for disabled women, they are unlikely to reduce the degree to which these women must depend on social insurance and public assistance.

Other proposals.—Several proposals that restrict the availability of DI benefits are part of the Reagan administration's proposal for Social Security. These restrictions are being proposed and imposed at a time when applications for DI have been dropping and the DI Trust Fund is in surplus. One proposal that was recently enacted requires that before the DI Trust Fund reimburses vocational programs for services provided, the beneficiary must have been successfully employed beyond the nine-month trial work period. Since the service mandate of vocational rehabilitation agencies is to treat the most severely impaired first (those least likely to become totally self-supporting through employment), the number of DI beneficiaries, men and women, receiving vocational rehabilitation services will most likely be sharply reduced. This proposal was enacted as part of the 1981 Reconciliation and Budget Act.

A second proposal, which has not been enacted to date, would increase the number of recent quarters of covered employment required to be eligible for DI from twenty of the last forty quarters to thirty of the last forty quarters. Since women's labor force participation is generally more intermittent than men's, the likely impact of this change, were it enacted, would be to further reduce the proportion of disabled women eligible for DI benefits.

Finally, administrative changes in DI have already tightened the criteria used to determine disability. The Reagan administration has proposed eliminating all but medical criteria in the determination of disability. This means that poorly educated, low-skilled workers approaching retirement age would no longer be found disabled if their impairments failed the medical standards but limited their employment options.

Conclusions

Despite the gaps in coverage and the large proportion lacking sufficient labor force experience to be covered by wage-replacement transfers, disabled women depend greatly on public income support programs. Some of the enacted and proposed changes in income support programs

that are intended to save money by encouraging employment may aid disabled women. Other restrictions, such as eliminating the minimum benefit, increasing the proportion of years of covered employment required for DI eligibility, defining disabilities more conservatively, and limiting DI financing of rehabilitation to those who work past the nine-month trial work period, are likely to be especially injurious since many women disabled before age sixty-four are low-wage workers in the secondary labor market or have intermittent patterns of labor force participation.

Although needy disabled women are a small group, women are a growing part of the labor force. It may be increasingly difficult to justify social insurance programs for disability whose taxes women pay, but whose benefits are unavailable owing to the characteristics of women's employment.

Notes

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1 Some of the recently proposed and enacted provisions are described in John A. Svahn, "Omnibus Reconciliation Act of 1981 Legislative History and Summary of OASDI and Medicare Provisions," *Social Security Bulletin* 44, no. 10 (October 1981) 3-24

2 Lois M. Verbrugge, "Females and Illness Recent Trends in Sex Differences in the United States," *Journal of Health and Social Behavior* 17 (December 1976) 387-403, Constance A. Nathanson, "Sex, Illness, and Medical Care," *Social Science and Medicine* 11 (January 1977) 15, Kathryn Allan, "First Findings of the 1972 Survey of the Disabled General Characteristics," *Social Security Bulletin* 39 (October 1976) 18-37

3 The survey is commonly referred to as the 1972 Survey of Disabled and Non-Disabled Adults, although its official title is the Survey of Health and Work Characteristics (SHWC). It was sponsored by the Social Security Administration. In addition to publishing a series of reports and papers based on these data, the Social Security Administration has made the raw data available to other researchers. The estimates in this paper are based on analysis of the survey data from the 7,073 women respondents aged thirty-five to sixty-four.

4 The sample overrepresents the disabled. Application of survey weights allows generalization to the adult noninstitutionalized population. See Allan (n. 2 above) for a more detailed description of the survey and sample.

5 Saad Z. Nagi, *Disability and Rehabilitation* (Columbus: Ohio University Press, 1969).

6 Harold S. Luft, *Poverty and Health* (Cambridge, Mass.: Ballinger Publishing Co., 1979), Mary Ellen Burdette and Phillip Frohlich, *The Effect of Disability on Unit Income—1972 Survey of Disabled and Non-disabled Adults*, Disability Survey '72 Disabled and Non-disabled Adults, Report No. 9, Office of Research and Statistics, Social Security Administration (Washington, D.C.: Government Printing Office, 1977).

7 Burdette and Frohlich, p. 12.

8 The remaining 32 percent of disabled women beneficiaries received early retirement old-age benefits based on their own records. Presumably they are women aged sixty-two to sixty-four whose impairments did not qualify them for Social Security Disability benefits, but their ages entitled them to the reduced retirement benefits.

9 See "Social Security Disability Amendments of 1980: Legislative History and Summary of Provisions" (*Social Security Bulletin* 44, no. 4 [April 1981]: 14-31) for a description of the 1980 amendments.

10 U.S. General Accounting Office, "Limits on Receipt of Multiple Disability Benefits Could Save Millions" (report to the chairman, Committee on Finance, U.S. Senate, Washington, D.C., July 28, 1981); B. Drummond Ayres, Jr., "Disability Payments Are Singled Out as Prime Area for Reducing Spending," *New York Times* (April 7, 1981).

11 U.S. Department of Health, Education, and Welfare, *Social Security Financing and Benefits*, Reports of the 1979 Advisory Council on Social Security (Washington, D.C.: DHEW, 1979), pp. 98 ff and 158-60, and *Social Security and the Changing Roles of Men and Women* (Washington, D.C.: Social Security Administration, 1980).

12 "Report of the President's Commission on Pension Policy: Executive Summary," *Social Security Bulletin* 44, no. 5 (May 1981): 14-17; U.S. Department of Health, Education and Welfare, *Social Security Financing and Benefits*.

13 The replacement rate is the ratio of disability transfer benefits to predisability earnings.

14 "Social Security Disability Amendments of 1980."

15 This estimate is based on their rating on the Functional Limitation Scale (William B. Burfield, "A Scale for Measuring Functional Limitations" [Health Studies Program Working Paper no. W-77-9, Maxwell Graduate School of Citizenship and Public Affairs, Syracuse University, 1977]). This scale takes the nature of the impairment and self-reported activity limitations (e.g., difficulty walking) into account. The result is an estimate of the percent to which an impaired person is functionally limited.

16 Sar A. Levitan and Robert Taggart, *Jobs for the Disabled* (Baltimore: Johns Hopkins University Press, 1977).

17 William G. Johnson, Nancy R. Mudrick, and Hoi Sing Wai, "Social Security Disability Insurance or Work for Wages: The Choices of Impaired Men and Women" (Health Studies Program Working Paper no. W-80-12, Maxwell Graduate School of Citizenship and Public Affairs, Syracuse University, 1980).

18 Under the DI program, beneficiaries engaged in substantial gainful activity (defined as monthly wages in excess of a specified amount) are deemed no longer disabled. The first nine months of work in which earnings are in excess of the SGA amount are considered a trial work period and DI benefits are maintained. If employment above SGA continues after the ninth month, the individual is determined to be no longer disabled and therefore ineligible for DI.

19 Nancy R. Mudrick and William G. Johnson, "Impairment and Household Expenditures: Implications for Disability Transfers" (Health Studies Program Working Paper no. W-80-11, Maxwell Graduate School of Citizenship and Public Affairs, Syracuse University, 1980).

20 Sandra Duchnok, *Health Care Coverage and Medical Care Utilization, 1972*, Disability Survey '72 Disabled and Non-disabled Adults, Report no. 11, Social Security Administration (Washington, D.C.: Government Printing Office, 1978).

21 Nancy S. Barrett, "Women in the Job Market: Occupations, Earnings, and Career Opportunities," in *The Subtle Revolution*, ed. R. E. Smith (Washington, D.C.: Urban Institute, 1979), pp. 31-61; William G. Johnson and James Lambrinos, "A Theoretical and Empirical Investigation of Discrimination against the Handicapped" (Health Studies Program Working Paper no. W-81-5, Maxwell Graduate School of Citizenship and Public Affairs, Syracuse University, 1981).

Block Grants and Funding Decisions: The Case for Social Indicators

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This study examines the response of county public welfare departments to requests for child protective services in different environments. The findings suggest that departments receive more requests from regions with poor populations and attempt to respond to such requests with increased expenditures. Because funds are distributed on the basis of proportion of population, children in economically depressed environments do not appear to receive the same services as children in richer environments. With block grant funding assuming a greater role, states can use social indicators of the environment to assist in service planning and to correct this problem.

Introduction

With block grants looming as the funding mechanism of the future, state officials must decide how monies should be distributed to meet social service needs. As part of the counterbalance of the harsh effects of the free enterprise system and to provide supplementary resources, social service providers must have some notion of the most urgent needs in order to determine targets for service emphasis.

In the past, some 40 percent of states' social services funds have been distributed through Title XX on a proportion-of-population basis.¹ This, of course, does not take into account poorer states whose residents may have greater needs because of the fewer resources available to

them. How does the environment of public social service organizations affect requests for their services? How have agencies responded in more impoverished environments? The answer to these questions was sought through a study of public social services departments in one state, California, using State Department of Social Services data and social indicators already collected—information readily available to states and counties for analysis.² This article reports findings from the study that suggest that social indicators can be used to help states with allocation decisions.

Organizations and Environment

The importance of the environment for organizations has long been acknowledged.³ It is useful to conceive of the environment as consisting of two different parts: (1) the "general" or "macro-" environment and (2) the "specific" or "task" environment. Although most work has concentrated on the specific or task environment, the present study focuses on the general or macro-environment. The general environment consists of the technical, political, and economic variables and the physical and social ecology. The physical ecology consists of climate, geography, and transportation, while the human or social ecology includes population factors such as age and sex distribution. Hall believes it is impossible to determine a ranking of the relative importance of these factors.⁴

The specific environment refers to parts of the environment crucial for goal setting and attainment, such as customers, suppliers, competitors, and regulatory groups.⁵ The environment is generally experienced through the interaction of an organization with groups, individuals, and agencies. This explains the greater emphasis in organization/environment studies.

For social service agencies, the human or social ecology aspect of the general environment is a potent influence. For example, Garbarino compared county environmental and demographic characteristics with reported child abuse rates, using variables such as median income and percentage of women in the labor force with minor children. He found significant correlations between demographic indicators of socioeconomic support systems and the referral rates for abuse.⁶ If variation in organizational response can be related to the social ecology, independent of other variables, the impact of the general environment is a strong force that requires consideration in service planning.

Aldrich's dimensions of the manner in which environments make resources available to organizations provide the theoretical model for

this study. Of his six dimensions, the four listed below are appropriate for studying the general environment and its effect on social service organizations.

Environmental richness or leanness refers to the relative level of resources available to an organization. For use with the human or social ecology, this can be viewed as the richness of economic resources for the population served. Study indicators were child poverty, as expressed by the percentage of children receiving Aid to Families with Dependent Children (AFDC), median income, and unemployment rate.

Environmental stability or instability points to the degree of turnover in the elements of the environment. Measures of this in the human ecology included birth and divorce rates.

Environmental homogeneity or heterogeneity is the degree of similarity or differentiation among elements of the population, including organizations, individuals, and social forces. For the human ecology, indicators of ethnic and age variation were used.

Environmental concentration or dispersion describes the degree to which resources and other factors are evenly distributed in particular locations, with an emphasis on randomization. This can be measured by indicators of population density, such as designation as an urban or rural county and the percentage of unincorporated area in the county.⁷

In summary, social indicators provide measures of the dimensions of the social ecology or general environment for social service agencies. These dimensions may have major significance for agency operations.

Method

The study was an exploratory descriptive survey, using secondary data and statistical analysis to examine the environment and its relationship to organization response. Because the study examined correlations and data for groups of counties only, it is not possible to draw conclusions concerning individual counties. Further, causation cannot be proved through this study, nor can the relationship of individual clients to the characteristics found in the social ecology.

California, with a large population and geographic area providing a variety of environments, is a state in which Title XX services⁸ are county administered and state supervised. Social indicators from 1979, compiled by the California Employment Development Department, expressed measures of the environmental dimensions from which the independent variables were selected.⁹ The dependent variables were

Table 1

COMPARATIVE MEANS SELECTED ENVIRONMENTAL INDICATORS

POPULATION CHARACTERISTIC	REGION			
	State	North	South	Central Belt Valley
Richness				
Children receiving AFDC (%)	3 19	2 94	3 57	3 09
Median income (\$)	10,777	10,291	11,162	12 481
Stability				
Birthrate per thousand	14 24	14	16	12 81
Divorce rate per thousand	5 71	5 78	5 71	6 36
Homogeneity				
Ethnic percentage				
Black	3 15	88	5 57	7 18
White	78 51	87 00	68	75 18
Hispanic	13 82	8 70	23 43	11 10
Other	4 52	3 42	3 00	6 54
Age percentage under 16	23 50	23	25 14	21 72
16-64	64 50	63	64 86	68 00
65 +	12 00	14	10	10 28
				5 25
				18
				4 53
				66 30
				25 30
				3 87
				27 62
				62 75
				9 63

SOURCE — Nancy A Gumprecht, "Organizations and Environment California Welfare Departments and Child Protective Services" (Ph D diss., University of Southern California, 1981)

organizational response measures for the entire state in addition to four distinct regions taken from the 1979 statistics of the California Department of Social Services.¹⁰ Data were collected by county and analyzed by state (for the entire state) and then by region. Frequency distributions of environmental and organizational response measures were compiled that indicated four distinct regions.¹¹ Geographic characteristics such as major forest recreational areas in the northern region and a fertile agricultural valley in the Central Valley region were associated with particular demographic profiles. Comparative means of selected environmental indicators for the state and four regions can be seen in table 1.

The organizational response measures (dependent variables) centered on child welfare services. Those selected were: the department emphasis on child protective and child welfare services, as set forth by the percentage of the mandatory¹² Title XX services budget spent on these services; the total dollar expenditure on voluntary children's services; the per capita expenditure on social services; the total number of child protective service referrals, the total number of such referrals received from within the department itself (internal); the total number of rejections of these referrals, and the total number of supportive services used by the department for child protective service clients—such as foster care, day care, and homemaker services.

Size of county population far outweighed all other variables in impact since the counties' populations ranged from 1,000 to over 7 million. First-order partial correlation coefficients, controlling for the effect of population, provided the primary statistic used to determine the effect of environmental factors other than population size. The statistical analyses were supplemented by examination of departments' policies and procedures regarding child protective services.

Findings

All regions plus a residual category for counties not constituting a distinct region showed differences in all organizational response measures. Comparative means of selected indicators for the state and regions can be seen in table 2.

All environmental dimensions displayed statistically significant correlation coefficients with a variety of organizational response measures for the entire state, the four regions, and the residual category. Perhaps the most interesting finding is the relationship of environmental richness to organizational response. When three organizational response indicators are selected (percentage of the budget spent on child welfare

Table 2

COMPARATIVE MEANS SELECTED INDICATORS OF ORGANIZATIONAL RESPONSE

DEPARTMENT CHARACTERISTIC	REGION			
	State	North	South	Central Belt Valley
Budget on child protective services (%) ..	31.94	32	38	38.87
Budget on child welfare services (%)	51.39	46	61	60.12
Per capita expense on social services (\$)	7.96	6.53	6.71	9.75
Child protective service referrals accepted (%)	71	61	80	62
				56

SOURCE—Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph.D. diss., University of Southern California, 1981)

Table 3

PARTIAL CORRELATION COEFFICIENTS ALL CALIFORNIA COUNTIES

ORGANIZATIONAL RESPONSE	POPULATION CHARACTERISTIC (Economic)		
	Children on AFDC	Median Income	Unemployment
Percentage of budget on child welfare services	2877*	2093	— 0224
Per capita expenditure on social services	4243**	0969	7892**
Protective service referrals	3975**	— 3355**	0502

SOURCE —Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph D. diss., University of Southern California, 1981)

NOTE —All coefficients computed as first-order partials controlling for effect of size of population $N = 55$

* $P < .05$

** $P < .01$

services, per capita expenditure on social services, total referrals for child protective services), correlation coefficients are shown for three richness indicators (percentage of children receiving AFDC, median income, unemployment rate). The contrast between the poorest region of the state and the rest of the state is particularly striking.

As presented in table 3, California shows that child poverty has statistically significant correlations for all three organizational response measures (Percentage of children receiving AFDC is the most frequent statistically significant measure of all the environmental indicators in all dimensions). As child poverty increases, so does the percentage of

Table 4

PARTIAL CORRELATION COEFFICIENTS NORTHERN REGION

ORGANIZATIONAL RESPONSE	POPULATION CHARACTERISTIC (Economic)		
	Children on AFDC	Median Income	Unemployment
Percentage of budget on child welfare services	2710	4472*	2332
Per capita expenditure on social services	.5939**	— 2359	4478*
Protective service referrals	3121	— 7554**	2193

SOURCE —Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph D. diss., University of Southern California, 1981)

NOTE —All coefficients computed as first-order partials controlling for effect of size of population $N = 16$

* $P < .05$

** $P < .01$

the budget spent on child welfare services, the per capita expenditure on social services, and referrals to the department for child protective services. As might be expected, a higher median income means fewer referrals. A particularly strong correlation is noted between unemployment and per capita expenditure on social services, a correlation explaining some 62 percent of the variation. Thus, as unemployment increases, so does per capita expenditure.

The northern region of the state is the most homogeneous in population; it is primarily Caucasian and rural and has the highest percentage of retired persons (see table 1). In table 4, the significant correlations generally match the findings for the entire state. Increased child poverty and unemployment mean increased per capita expenditures. However, a higher median income is associated with a higher budget emphasis on child welfare services in the northern region, unlike the findings for all California counties. An explanation of this could be that counties with a lower median income in this region are seen to have more retirees and thus a lower percentage of children needing services.¹³

Correlations for the southern region, as shown in table 5, provide findings similar to the state and the northern region. The southern region has a high Hispanic population and a large percentage of the population under sixteen (see table 1). It has the highest budget emphasis on child welfare services and accepts the highest percentage of referrals for child protective services (see table 2). High child poverty is correlated with a high per capita expenditure and more referrals, while a high median income shows a lower per capita expenditure and fewer referrals.

The Central Belt region has the highest median income, the largest percentage of working-age adults, the lowest birthrate, and the highest

Table 5

PARTIAL CORRELATION COEFFICIENTS: SOUTHERN REGION

ORGANIZATIONAL RESPONSE	POPULATION CHARACTERISTIC (Economic)		
	Children on AFDC	Median Income	Unemployment
Percentage of budget on child welfare services	-.3418	-.2468	-.1927
Per capita expenditure on social services	.8519*	-.7868*	.3302
Protective service referrals	.7398*	-.7235*	.2543

SOURCE—Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph.D. diss., University of Southern California, 1981).

NOTE—All coefficients computed as first-order partials controlling for effect of size of population. $N = 4$.

* $P < .05$

Table 6

PARTIAL CORRELATION COEFFICIENTS: CENTRAL BELT REGION

ORGANIZATIONAL RESPONSE	POPULATION CHARACTERISTIC (Economic)		
	Children on AFDC	Median Income	Unemployment
Percentage of budget on child welfare services	6135*	- 6832*	5478
Per capita expenditure on social services	3916	1857	- 2122
Protective service referrals	5980*	- 1664	4104

SOURCE —Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph.D. diss., University of Southern California, 1981)

NOTE —All coefficients computed as first-order partials controlling for effect of size of population $N = 11$

* $P < .05$

divorce rate of all regions (see table 1). As shown in table 6, increased child poverty is associated with increased emphasis on child welfare services and referrals, while a lower median income points to a greater number of referrals. Thus the three regions and the state as a whole generally show a similar picture, with environmental poverty associated with increased department response.

The Central Valley has the most child poverty, with the percentage of children receiving AFDC almost two percentage points above any other region (see table 1). This region of highest child poverty also has the highest birthrate and the largest Hispanic population, as can be seen in table 1. It is interesting to note that child poverty here shows no correlation of significance with organizational response; the only correlation of organizational response with environmental richness indicators is that of unemployment with child protective service referrals. This correlation coefficient is .9237, with $P < .01$, meaning that 85 percent of the variation in such referrals can be explained by the variation in unemployment rate. The Central Valley spends the highest per capita amount on social services of any region, well above the state mean, as can be seen in table 2. Despite this, as seen in table 2, the departments in this region accept the lowest percentage of protective service referrals of all regions.

Counties' policies and procedures.—County departments were asked for their policies and procedures regarding child protective services. Of fifty-eight counties, forty-one responded, and thirty-one had some documents. Many counties had few documents, however, and the information can be used only to supplement impressions gained through formal data analysis. The procedures indicate that counties offer varying levels of service for child abuse and neglect problems, despite uniform

state guidelines. Counties designate sexual abuse and severe physical abuse as their highest priorities. Although state regulations require counties to serve all children under eighteen, several counties do not handle adolescents; others limit the cases of neglect for which they will intervene to "severe life-threatening neglect" or neglect only of children under the age of six. Whether the written guidelines are used by departments is unknown, but several counties included memoranda and letters stating that the policies had been publicly announced because of a lack of funds and had generated local controversy. It should be noted that these documents were dated 1980 or earlier, before the current national administration took office.

Discussion

The central theme emerging from these findings is that environmental richness, as expressed by the resources available to county residents, does make a difference in demand for services and that county departments attempt to meet that demand in a variety of ways. Methods used include spending more per capita on social services and increasing the budget proportion spent on child welfare services. Most serious is the case of the poorest region compared with other regions of the state as a whole. The Central Valley, with the highest child poverty, spends more per capita for services and still rejects a higher percentage of referrals than any other region. This suggests that there is excessive demand on departments strained to their utmost, a suggestion that is further supported by the policies that point to devices to exclude cases from receiving services within departments such as age and time limits despite state mandates. If the findings in this study, given the limitations inherent in using secondary data, are accurate, children who live in poor regions in California do not receive the same protection from child abuse and neglect as do children residing in regions with more resources available to their residents.

If these findings are a true portrayal, what policy implications can be drawn for social services funding and allocation? Given the stringer conditions prevailing under the current economic and political atmosphere, it is going to be exceedingly difficult to determine appropriate methods of dispensing monies under block grants. Politically popular or powerful client groups may be pitted against those less articulate in their own behalf. An alternative lies in continuing past allocation of funds with each service area receiving a smaller percentage of its former amount. Although in some ways this appears to be the more equitable, it perpetuates prior decisions for fund distribution and doc-

not determine priorities. Too small an amount of money spread too thinly may lead to entirely inadequate programs in all areas.

This study suggests that social indicators can be used as fund-allocation mechanisms. The strongest social indicator in this study is child poverty, expressed by the percentage of children receiving AFDC. Other useful indicators for such services as home support and adult protection may be the percentage of adults receiving Supplemental Security Income (SSI). For example, states might choose to allocate a flat proportion of population dollar figure to each county, with extra funds for counties with SSI or AFDC recipients more than a certain percentage above the state mean. Unemployment in this study appears as a powerful factor influencing organizational response and provides another useful social indicator. If mini-block grants such as a child welfare block grant become a reality, appropriate social indicators can be tailored to assist in the fund distribution for each.

The advantage of social indicators as a fund-allocation device is that they are readily available and responsive to changing socioeconomic conditions but not to political pressure. As states attempt to meet the challenge of providing in an environment with declining resources, all technology available to policy planners should be considered. The findings of this study promote one approach.

Notes

1 Martha N. Ozawa, "Distribution of Social Service Expenditures—A Study," *Social Work Research and Abstracts* 16 (Spring 1980): 3–10.

2 Nancy A. Gumprecht, "Organizations and Environment: California Welfare Departments and Child Protective Services" (Ph.D. diss., University of Southern California, 1981).

3 Many theorists have attempted to classify organizational environments along a range of dimensions or continua or a more complex matrix or typology. See Howard F. Aldrich, *Organizations and Environments* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1979), pp. 63–70; F. E. Emery and E. L. Trist, "The Causal Texture of Organizational Environments," in *Complex Organizations and Their Environments*, ed. M. Brinkerhoff and P. Kunz (Dubuque, Iowa: William Brown, 1972); Ray Jurkovich, "A Core Typology of Organizational Environments," *Administrative Science Quarterly* 19 (September 1974): 380–94.

4 Richard H. Hall, *Organizations: Structure and Process* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1972), pp. 298–312.

5 James D. Thompson, *Organizations in Action* (New York: McGraw-Hill Book Co., 1967), pp. 27–28.

6 James Garbarino, "A Preliminary Study of Some Ecological Correlates of Child Abuse: The Impact of Socioeconomic Stress on Mothers," *Child Development* 47 (1976): 178–85.

7 Aldrich.

8 Title XX of the Social Security Act, which became effective on October 1, 1975, authorizes federal grants to states for service expenditures.

9. California Employment Development Department, *Annual Planning Information and Labor Market Newsletter* (Sacramento: California Counties' Employment and Data Research Offices, 1979).

10. California Department of Social Services (CDSS), *Child Protective Services in California* (Sacramento: CDSS, January–December 1979), California Department of Social Services, *Comprehensive Annual Services Program Plan: Title XX* (Sacramento: CDSS, July 1980). Statistics published in the 1980 plan are projections based on expenditures during the previous fiscal year. Since the publication year of the Title XX plan does not follow a calendar year, it was necessary to use the 1980 year to obtain figures closest to 1979 expenditures by the counties.

11. Gumprecht, pp. 152–63.

12. California has ten services which counties must provide with Title XX funds and thirteen additional services that counties may elect to provide with Title XX fund contributions. California Department of Social Services, *Comprehensive Annual Services Program Plan*, p. 1.

13. Gumprecht, p. 85.

Debate with Authors

The Scientific Imperative Again

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It is both exciting and sad to read the exchange between Martha Brunswick Heineman (now Martha Heineman Pieper*) and John R. Schuerman about the state of research in social work (*Social Service Review* 56, no. 1 [March 1982] 144–48). Exciting because an important controversy that has shaped social work development has found its way into print; sad because, in a way, the dialogue epitomizes the troubles that beset social work. Both writers represent their points of view aptly, but neither really “hears” the other.

Schuerman never responds to the point that most social work problems and processes are too complicated to lend themselves to experimental designs. Pieper, on the other hand, does not adequately acknowledge the problems of reliability and validity that continue to plague social work research. In short, although both writers make important points, neither really addresses the other's position.

Schuerman appears to represent a point of view that does not distinguish between the necessity for consensually validated behavioral criteria in social work research and for behaviorism as a treatment method. Behavioral definitions of problems and processes are necessary and desirable, but to limit social work problems and processes to those considered respectable by behaviorally oriented therapists is to succumb to a theoretical bias that has had the effect of ignoring most of the real world of social work practice, where (even if it were their goal to do so) neither practitioners nor clients are in a position to control the consequences of behavior—a *sine qua non* of behavioral therapy.

Most social work concepts and activities, although complicated, can be “operationalized” in observable behavioral terms, thereby meeting Schuerman's requirement. However, in recent years only some concepts and activities (variants

* We regret that Ms. Pieper's name was misspelled to read “Piper” in the June 1982 issue of *Social Service Review*.

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on the theme of behaviorism) have been considered respectable and therefore worth testing. Social work practitioners and researchers need to understand the issues that Pieper so aptly summarizes in her paper so that they can go to work to solve the basic problems confronting social work research at practical as well as epistemological levels.

In recent years, the tendency to limit social work practice and research to one-dimensional experimental designs considered acceptable by behaviorism has had the effect of devaluing a rich body of social work knowledge, thereby impoverishing the profession as a whole. Concepts that should have been refined and tested in complicated, sophisticated research designs have been thrown out like the proverbial baby in the bath water because we lack the research technology at the time to examine them rigorously.

Now that the controversy between behaviorists and nonbehaviorists has begun to surface, it would be nice if the protagonists allowed themselves to listen and learn from each other. In short, behaviorally oriented research could help nonbehaviorists learn to define their concepts in observable and measurable terms, while the latter could teach the former something about the multiplicity of variables that must be accounted for in valid social work research. Both could profit from the exchange of information.

Perhaps this is not too much to hope for in a new generation of social workers who are clearly better prepared to argue their positions publicly than were their elders. By publishing Martha Hememan Pieper's excellent paper, the *Social Service Review* has taken a significant step in that direction.

Book Reviews

Evaluative Research in Social Care. Edited by E. Matilda Goldberg and Naomi Connelly. Exeter, N.H.: Heinemann Educational Books, 1981. Pp. 320. \$45.00.

The editors have done a major service to the social service field and particularly to researchers in that field by organizing a workshop on evaluative research and by preparing the workshop papers for publication. The papers are consistently high quality, with little of the repetition and exhortation common to such compilations. As its subtitle, "Papers from a Workshop on Recent Trends in Evaluative Research in Social Work and the Social Services," indicates, the book reflects recent trends in evaluative research, and it suggests desirable directions for future work. Its greatest contribution to the American reader is, however, the information it provides on a wide range of British research, of which parochial researchers such as myself may be unaware, for the work reported is wide ranging and creative in subject matter and design.

The book is composed of a keynote paper by William J. Reid and Patricia Hamahan, reviewing recent research in the United States on the effectiveness of social work, fifteen papers on specific evaluative undertakings, recently completed or still under way; and a brief postscript by the editors. Reid and Hamahan note several characteristics that distinguish recent studies of effectiveness of social work from earlier research: dominance of structured forms of practice, greater diversity of clientele, more circumscribed objectives, greater control of service variables by the researchers, use of harder and narrower measures of change, and outcomes that are more positive but not necessarily of great practical significance.

It is not feasible in a brief review to discuss the other individual papers or even to identify their twenty contributors, most of whom are associated with British universities or research units. Each describes a project clearly and concisely, discusses the problems of implementing research plans in the real world, and points out implications for further research or policy development in the area of concern.

The book is organized in four sections, the first of which contains four chapters on evaluation of different forms of individual treatment by experimental methods—short-term task-centered counseling of patients who had attempted suicide, counseling of patients with minor neurotic illness with a view to reducing their use of doctors and drugs, behavior modification by nurse-therapists with hospitalized neurotics, and counseling to probationers on social

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problems. The first and third of these exemplify the features cited in the keynote paper.

Part 2 on evaluating the effects of institutional treatment has chapters on research on penal institutions, design and management of homes for the elderly, and the outcomes of early institutional care of children. The point is well taken in the first of these that cross-institutional research may be better in detecting and explaining effects than experimental design applied in a single setting, as it permits attention to situational variables that may outweigh experimental input.

The five papers in the section "Evaluating the Impact of Specific Community Services by Non-experimental Methods" describe programs varying from an attempt to build a stronger developmental component into day care to service intended to reduce institutionalization of the aged. Two of these programs seem noteworthy as they are innovative in concept and very difficult to evaluate. In one, staff were given a great deal of flexibility in operation as well as some control of budget as a way to enhance the cost effectiveness of service to elderly individuals on the margin of institutionalization. The other examines "patch-based social service teams," in which the teams function in a highly flexible and informal way in small geographic areas. To evaluate the plan data were collected by a range of methods in areas with and without the patch system. Style of leadership was found to have as much to do with what happened as the organizational plan, a finding that again illustrates the impact of unintended inputs. The problems of studying a program in flux, of not burdening staff unduly, and of community variations that outweigh the influence of program differences are among those dealt with.

In recent years a good deal of time, energy, money, and frustration have been invested in the United States in developing and using case review and information systems. Part 3, "Evaluating the Provision of Social Care by Monitoring," contains three chapters that suggest such investment may be worthwhile if the data are used as constructively as in these three examples. Continuous data on client characteristics, service objectives, and input prove useful in indicating trends and gaps in service, in clarifying staff roles, in staff development, and in administration.

The desirability of effective monitoring plans plus action research and cross-sectional studies, followed by experimental field tests, is a conclusion of the participants with which I could not disagree. Whatever one's conviction about appropriate research strategy, exposure to this lively account of many varied evaluative research projects will be informative and stimulating. The only thing I have against the book is its price, however, the package Mauid Goldberg and Naomi Connelly have put together is well worth the cost.

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Planned Short-Term Treatment. By Richard A. Wells. New York: Free Press, 1982. Pp. xiii + 281. \$17.95.

Wells's book is another welcome addition to the recent Free Press series on treatment approaches in the human services. As the foreword notes, it is written from the clinician's viewpoint for students, professionals, and academicians in the helping professions, although its primary orientation is social work. The author's intent is to present a model of planned short-term intervention that emphasizes the manner in which technique and strategy are

adapted to the specific needs and unique characteristics of clients (p. xv). This understanding is quite ambitious. While Wells falls short of presenting an integrated model of short-term treatment—call it eclectic or “pluralistic,” as he suggests—he does succeed in explicating a number of important issues with which practitioners have been grappling for years.

The problem in writing a book on this subject is that nobody agrees on what short-term treatment is. For example, how long or short must it be? Not to mention the general observation that the author astutely notes (p. 63) that in about one of every five or six cases clients return though they had not planned to. When this is seen in context with Wells's recommendation that the client return for a planned follow-up interview (p. 63), the reader might well conclude that episodic treatment would be a better way to conceptualize what is done in many instances.

The confusion is further compounded by the statement that the length of intervention is usually between three and fifteen sessions (p. 2), no explication being offered as to the period of weeks or months involved. This is then followed by a conceptualization of the clinical process as comprising three distinct phases with as many as eighteen interviews (p. 9). The latter total, however, does not differ much from that evidenced in research and practice, where so-called continued service cases may average only nine interviews (p. 16), and even long-term cases may only have a median of nineteen. Thus, given the state of our knowledge, it is better to leave the clarification of time parameters to future researchers and accept Wells's rather general description of the term “short-term treatment” as “a group (or family) of related therapeutic interventions in which the helper deliberately and planfully limits both the goals and duration of contact” (p. 2).

Having buttressed his writing with well-chosen references about the effectiveness of short-term treatment and using apt vignettes and case illustrations throughout, Wells goes on to describe the process. He does this by delving at depth into the theoretical bases of a number of approaches that have not been designed expressly for short-term treatment but can nevertheless be employed. His focus is on the appropriateness of these theoretical frameworks for particular populations. Basically, the argument is made that theories and techniques that appeal to affective, cognitive, and behavioral elements of social functioning—most of the theoretical approaches currently in use—are suitable. For example, ego psychology is presented, with its cluster of techniques from abreaction to interpretation (p. 41). Then there is a list of faulty thinking processes such as arbitrary inference and overgeneralization (p. 217), which is important in the use of cognitive restructuring methods. And considerable weight is given to behavioral approaches, including modeling and teaching and the utilization of tasks and homework. The author's sensitivity as a practitioner is particularly well illustrated in chapters dealing with the “scenarios for practice,” the initial interview, and a concluding chapter in which the directive stance of the therapist is emphasized.

This is also a useful book because it touches on practice issues that go beyond short-term treatment. Noting some of these issues, I wonder whether, in a cost-conscious age like ours, there will ever be a book specifically about long-term treatment, however conceptualized. Surely there are populations where problems need attention beyond the limits of discrete time periods. Be that as it may, this should not detract from this important work, which is a significant contribution to practice.

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Behavioral Methods in Social Welfare. Edited by Steven Paul Schinke. Hawthorne, N Y : Walter de Gruyter, Inc., 1981. Pp xxx + 386 \$24.95.

Steven Paul Schinke has edited a collection of behavioral social work program reports and issue papers that reflect a number of important practice concerns. If behavioral methods in social work have "come of age," as Schinke asserts (p xii), it is time for such a survey of current applications. These reports attest to the growing diversity of client groups and problem situations that are responsive to behavioral intervention. Unlike other books in this field, the book is a review of a number of specific programs rather than a delineation of a model or techniques for particular problems. Consequently, the reader has an overview of applications that inform basic behavioral knowledge. In addition, the final section includes attention to issues of worker training and program evaluation, both important and necessary to effect successful programs.

A number of important questions are indirectly addressed that inform us as to how behavioral methods have come of age. These include:

1. Is behavioral social work applicable to a wide range of problems? Critics have argued that the approach is suited only to treating superficial, noxious behaviors such as those seen by disturbed children or institutionalized persons. These articles solidly refute such a supposition, demonstrating applications to such fields as child management, increasing parental skills, dealing with complex problems of the adolescent, treating child abuse, decreasing adult self-criticism and improving assertive skills, correcting sexual dysfunction, eliminating social conflict and isolation among the elderly, correcting unemployment, and treating affective disorders including depression. Clearly, behavioral applications have become more comprehensive over time rather than more limited. What is not addressed in this book is the use of behavioral methods for community problem solving: poverty, advocacy for the underprivileged, and environmental change. Including such illustrations would have further expanded the depiction of the wide practice repertoire of the behavioral social worker.

2. Does behavioral social work address basic problems, or is its focus overly symptomatic? A number of problem populations and difficulties are addressed on several levels. Both observable behavior problems and more cognitive behaviors or thoughts are included. Client self-selection of problems is frequent in these reports. Intervention targets include family and social relationships, using communication and negotiation training. Decision-making processes and service coordination problems are successfully addressed. Personal difficulties such as obtaining employment and dealing with compulsive or addictive tendencies are effectively treated. Problems addressed appear to be socially relevant to the individuals and families and important enough to make a critical difference in their lives. In many of the program presentations, follow-up data are included showing ongoing treatment gains. Several of the contributors describe special efforts to plan for maintenance of change by incorporating extended interventions, simplified maintenance procedures, and environmental changes into the programs. These applications seem neither superficial nor transitional in nature.

3. Are behavioral social work approaches effective? The majority of these case reports include evaluation data. Methods used include single-case designs, consumer evaluations, and control and comparison group designs. In general, the reported results are positive with regard to the effectiveness of behavior procedures. Many of the evaluations are impressive, including both target behaviors and adjunctive variables. Many show maintenance or continuity of gains after treatment termination. Several contributors demonstrate their honesty

and the limits of their program by reporting negative findings and by considering implications for research and practice. Predominantly positive client consumer responses to the procedure are reported. Notably, almost all of these program reports include well-developed evaluation components that demonstrate that (1) many behavioral procedures are effective social work interventions, and (2) these kinds of interventions may be evaluated, often during the course of intervention, so that findings can be incorporated for client benefit.

4. Could an informed worker replicate these methods, or are behavioral programs too technical for the average worker? Schinke asserts that "replication is the objective over every chapter" of this book (p. xxx). Given basic behavioral social work training as a prerequisite, the informed worker can use these reports as a basis from which to develop programs to meet perceived client needs. Actual program replication may be difficult, however, as page limitations curtail thorough presentation of each program. In several of the chapters, exactly what was done (the actual program components or independent variables) is unclear. Others present fine detail, supplemented with illustrative case examples. It appears that these methods are seldom so theoretical that the average MSW-prepared worker with some basic understanding of behavior principles could not use them.

The final section of the book deals with training and evaluation issues rather than specific intervention methods. Schinke and his contributors assert and demonstrate that behavioral methods can be used to develop professional competencies, for example, a chapter by Jeffrey L. Edleson and Sheldon D. Rose illustrates how behavioral rehearsal and modeling can be useful in supervising and teaching interview skills. Others address the complex issues of introducing behavioral modalities into large agencies and dealing with multiple staff who may or may not have sophisticated training. These chapters suggest that this approach can be effectively taught to both professional and semi-professional workers and may be a useful source of training methods. With regard to evaluation methods, the two final chapters present single-case and comparison group evaluation designs. These chapters appear to be an appendage to an otherwise unified collection of practice examples. The final chapters describe the logic and method of these evaluation methods rather than special applications of the methods. Although relevant to behavioral methods, such presentations are available elsewhere in the literature (e.g., Jayaratne and Levy's *Empirical Clinical Practice* [New York: Columbia University Press, 1979], and numerous articles by Thomas, Fischer, Howe, and others). These chapters provide additional examples of evaluation approaches.

Behavioral social work has shown steady growth since early applications emerged in the late 1960s and early 1970s. Schinke's book speaks to the breadth of the field methods and counters some of the myths of overspecificity of technique, limited application potential, and lack of permanence of changes. Schinke and his contributors provide a solid reference for the worker who has identified a problem in clinical practice, is considering some solutions based on behavioral social work principles, and is searching for some examples of how these principles have been applied in other programs. Schinke's book makes a fine companion piece to the many practice books in behavioral social work that have recently emerged, as well as the very recent flow of social work research textbooks.

These eighteen chapters illustrate that behavioral social work is not a dogmatic approach that may be a dangerous rather than helpful force. Behavioral applications to social work emerge from a set of principles for teaching clients positive skills to deal with environmental and personal problems or help the client or others in their social situation to design a more positive environment.

The variety of techniques, problems, and successes outlined in this collection suggest the emergence of a rich practice foundation for many common clinical social work problems

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The History and Politics of Community Mental Health. By Murray Levine. New York: Oxford University Press, 1981. Pp 232 \$14.95 (cloth), \$6.95 (paper)

Curricula for mental health professionals have too frequently ignored the history and politics of the mental health delivery system. Students are often unfamiliar with the antecedents of the therapeutic milieu in the moral treatment of the asylum. They usually do not learn that both the outpatient clinic and preventive programs began more than fifty years before the federal community mental health centers legislation of 1963.

Levine's book elucidates the context in which mental health policies are developed and implemented. He reminds readers of the complexity of that context in which "political, ideological, historical, social, economic and psychological factors are inextricably intertwined" (p. 102). While his major focus is the federal community mental health policies of the last twenty years, his review of the care of the mentally ill over two centuries gives the basis for assessing pitfalls in today's programs.

The analysis of the influence of related federal policies and programs—Medicare, Medicaid, and Supplementary Social Security Income—on deinstitutionalization is a major contribution. These programs affect where people are hospitalized and where they live in the community, which are crucial elements in understanding the problems in today's mental health system.

The review of mental health litigation is a welcome addition. It is clearly written and avoids legalese. However, Levine probably overestimates the impact of the litigation on patients' rights. Only in a footnote well into the presentation does he admit that the Supreme Court has not confirmed a constitutional right to treatment (p. 155). The book also overvalues the ability of the courts and their designees to implement community-based treatment programs.

The analysis of the functioning of the President's Commission on Mental Health in the Carter administration in contrast to the Joint Commission of twenty years before helps the reader appreciate the influence of politics. Providers of service and universities (as receivers of funds for training and research) joined with advocacy groups to form a new political constituency for mental health. Levine sums up the ineffectiveness of the Carter Commission by stating, "In a significant proportion of the recommendations, one could not be certain of what sort of program would fulfill the generalities expressed" (p. 188).

The value of the book is limited because the Reagan block grants were implemented after the book went to press. The lengthy analysis of the Mental Health Systems Act implies that federal involvement in community mental health policy is likely to continue and probably increase. The Reagan administration has made the Systems Act irrelevant.

Reading between the lines of Levine's own account of the history of federal involvement, one could have forecast a shift back from federal to state responsibility. Perhaps if Levine had seen state government as less "byzantine," he would have given more attention to examining how states deal with mental

health problems. Illinois, for example, is directing its \$65 million spent in community programs to appropriate care for the chronically mentally ill and their families. While he does correctly analyze the problems of investments in expensive hospital facilities and pressures from state employee unions, Levine implies that state and county governments are not involved in developing progressive policies. At least until the end of this administration, however, the future of community mental health programs will be dependent on the political process at state and local levels.

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The Intellectual Base of Social Work Practice: Tools for Thought in a Helping Profession. By Harold Lewis. New York: Lois and Samuel Silberman Fund, and Haworth Press, 1982. Pp. xiii+258. \$19.95.

Throughout the history of twentieth-century social work, professional education has emphasized the development and cultivation of a wide variety of "helping" skills, including, for example, skills related to diagnosis and assessment, counseling, program evaluation, community organization, discharge planning, and crisis intervention. This emphasis has not been misplaced. After all, social work is a profession whose ultimate aim is to promote activities that are designed to assist people who experience problems in living, and a competent professional is one who skillfully carries out the technical aspects of helping.

In addition to training prospective social workers to carry out technical professional tasks with proficiency, social work education traditionally has placed considerable emphasis as well on the development or inculcation of certain cognitive or intellectual skills. Thus, social workers are expected to know how to *think*, as well as how to *do*.

Harold Lewis has provided an unusual addition to the relatively small number of works in the social work literature that address in depth the cognitive side of professional work. *The Intellectual Base of Social Work Practice*—the second volume of the Saul Horowitz, Jr. Memorial Series of the Hunter College School of Social Work, of which Lewis is Dean, and whose publication was supported by the Lois and Samuel Silberman Fund—is an attempt to review the nature of intellectual tasks social workers should be expected to engage in and the ways in which these tasks can be incorporated into daily professional activities. According to Lewis, "This profession attracts persons primarily interested in mental work, in contrast to manual work. That the profession also attracts persons whose talents for relating to people may be above average, is an added advantage. It is not a substitute for the intellectual interest that prompts an individual to pursue a specialized advanced education. This book therefore focuses on the intellectual element in social work practice" (pp. 4–5).

The content of the book, which Lewis refers to as essays, apparently was influenced to a large extent by the author's year-long stay at the Center for Advanced Study in the Behavioral Sciences. In his preface, Lewis observes that "an interest in how the brain knows it is being asked a question stimulated the essays that make up this volume. This interest in turn originated in another concern—a desire to improve education for professional practice. It occurred [sic] to me that the manner in which information was organized and processed for storage in memory and then recovered for action was intimately connected with the inner-directed questions practitioners put to themselves when rendering their services" (p. xi).

The book is organized into three main sections. Part I focuses on the concept of work and the attributes of workers, clients, and services that become involved in the social work enterprise. Part II reviews what Lewis refers to as "elements of skill" or tools that are frequently used in social work practice: intellectual tools (in particular, the relationship between specific rules and more general principles of social work), theory, ethics, knowledge, values, style, and skill. Part III addresses a series of issues related to how the worker reasons in practice, how the worker's reasoning is used to arrive at "a definition of unmet need," and the assessment of possible interventions that can be introduced in response to these needs.

There is no doubt that Lewis has addressed a range of issues that are central not only to the development of individual social workers but to the development of the profession itself. Though there is no denying that the quality of our individual and collective ability will ultimately turn on the quality of our concrete and visible interventions in the lives of individuals, families, groups, communities, and organizations, it would be unfortunately shortsighted for us to ignore the invisible intellectual work that must necessarily precede and accompany (and, one would hope, follow) our decisions to intervene in the first place. Lewis's work serves as a useful goad and a reminder of the intellectual nature of what it is we do in our professional lives. Further, the work is of refreshing breadth. His focus is on the forest of the profession rather than its trees. Lewis's discussion also reflects a sound appreciation of the theoretical, empirical, political, economic, practical, and ethical aspects of contemporary social work, and his observations and claims are delivered both humbly and sensitively.

I have some concern, though, that the principal elements of Lewis's important message may not reach the audience that can perhaps make the most use of it. This may occur because of the style of writing and language used throughout the text. The style is quite abstract. Readers who are not persistent or who have a low threshold of tolerance for abstraction may find portions of the text to be particularly abstruse, especially those that depend heavily on language and concepts from the literature on cybernetics and artificial intelligence. Those who are unfamiliar with the terms and jargon that are characteristic of such literature may find a number of the text's passages difficult to grasp. All things considered, this book is most likely to be appreciated by educators, practitioners, and students who have a strong bent toward abstract commentary.

The major observations Lewis makes about the intellectual elements of social work practice are well taken. The cognitive side of social work is linked inextricably with the action side of the profession. Competent social work necessarily entails considerable skill in both areas. Lewis's general reflections on the intellectual base of social work, based on the personal view of practice he has developed during his noteworthy career, are both provocative and timely.

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Social Development: Conceptual, Methodological and Policy Issues. Edited by John F. Jones and Rama S. Pandey. New York: St. Martin's Press, 1981. Pp. x+183. \$15.95.

This is a disappointing book. It is a collection of specially commissioned essays and could be said to represent the collective wisdom and experience of the

School of Social Development, University of Minnesota—Duluth, as seven of the ten authors have been members of the faculty of that school and closely associated with its work. I came to the book with high expectations, soon to be deflated by the difficulty in appreciating the conceptual framework of social development as set forth in the first four chapters. Apart from the first, setting out the complexities and failures of development, these chapters are written in the flat, noncontroversial, dull prose characteristic of UN publications, prolix to a fault, and frequently laboring the obvious. Readers who turn to this book, tempted by the publisher's claim that it could "serve as a text in schools of social work as well as a guide to those working in the field," will be irritated by many statements that were once gems of conventional wisdom but have lost their impact through constant repetition over the years. Indeed, chapter 3, on "Strategies for Social Development," is little more than a summary of UN pronouncements and reports of the early 1970s elaborating on the then-fashionable theme of participation in the development process. The book does not come alive until chapters 6–8, which deal with the methodology of development. Chapter 5, by David G. Gil, one of the longest in the book, was not specially written for the collection and was previously published in a journal. It examines from a humanistic-egalitarian perspective social policies and social development, and those familiar with Gil's books will find it repetitive.

When the authors forget that they were UN consultants or experts, and write from their own convictions, what they have to say is fresh and invigorating. Salimar Omer on "Institution Building" (chap. 7) grapples with the realities of operationalizing a philosophy of participation and stresses the importance of institutions being decentralized for the diffusion of power and accountability for local control. Her choice of examples of people's institutions—the Chinese communes and the kibbutzim of Israel—is not the most persuasive, since the former are now dismantled and the latter unacceptable because of their instrumental role in Israeli defense, colonization of Arab lands, and access to resources not available in less developed countries.

Nancy Runkle Hooyman examines the strategies and dilemmas of citizen participation in chapter 8. One of the major dilemmas is that between "what seems rational to planners versus what seems relevant to citizens" (p. 109). She searches beyond the slogans and bromides of international conference resolutions and recommends a model drawing on the balance theory approach to change and development that accepts the legitimate contributions of both the bureaucracy and professionals, and citizens groups. Experience has shown that there has been "an absence of effective structures for citizen participation in public decision making, as well as citizens' lack of expert knowledge to enable them to solve complex technical problems" (p. 131). These two problems have to be resolved, and Hooyman suggests how this is to be done.

The final chapter, on "Education for Social Development" (chap. 10), addresses the question of the supply of qualified manpower for social planning and development, and claims that "in most countries professional education in schools of social work is the preferred means of training personnel" for leadership functions in these processes (p. 153). This claim will be disputed. However, the model for social development set out by John F. Jones and C. David Hollister is convincing, and attractive as an outline curriculum. Schools of social work have as good a claim as others of more recent birth (e.g., development studies, environmental design, continuing education) in providing the educational program to train the generalist that social development requires—"one who in a sense can work both the bureaucratic policy making and the community advocacy sides of the street" (p. 166). Jones and Hollister see him

qualified to move quickly back and forth, in and among needs identification, community organization, policy formulation, planning, and administration.

It would have been better to put this final chapter first in the book so as to seize and hold the attention of the reader, given that most readers are likely to be students and teachers of the social sciences, glad to have the opportunity to examine the curriculum recommended by the Minnesota—Duluth school. Although beginning with concepts and interpretations is more conventional and logical, in this case it increases the risk that the reader will not bother to persevere through some very flat and unexciting pages. This would be a pity, as the persistent reader is rewarded from time to time with stimulating insights and reflections.

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Helping America's Families. By Alfred J. Kahn and Sheila B. Kamerman. Philadelphia: Temple University Press, 1982. Pp. viii+266. \$20.00 (cloth); \$9.95 (paper).

In a time of crisis for the social work profession, it is unfortunate that we know so little about the essential nature of the helping process. The knowledge base of the profession seems to rest on broad philosophical statements and generalizations about psychological processes that we hope apply in all situations. However, these principles do not capture the essential components of how to help in specific situations. Throughout social work education there is a basic, yet flawed assumption that people want and need the helping services we offer even if they do not recognize this at intake. Meanwhile, services in the private sector have been expanding, and the self-help movement has never been stronger. A revolution in social services is taking place, and it is taking place, for the most part, outside of our profession. Health indicators for the profession are not good. Traditional funding sources for voluntary agencies have gradually decreased, public funds will quickly disappear, salaries for professional social workers no longer represent a middle-class life-style, social work positions in major institutions have been lost, and enrollments in professional programs are at crisis proportions. The response of our professional organizations to these crises has been less than satisfactory. The response of our academic institutions over the past few years has been to propose cosmetic changes based on infatuations with ecological systems or $N = 1$ experimental studies. No one seems to be examining and describing the value in what we do, the specific service activities we perform that people find useful, or how to expand and develop the list of critical service activities.

In this context, Kahn and Kamerman's latest book is an extremely important, if not revolutionary, document. By asking the simple question, What do American families do when they need help? they put our service activities in a proper, universalistic perspective. We are not the only ones who offer help. A recent Gallup survey quoted in this book reveals that only 11 percent of the general population turn to professional counselors for help with a personal problem. The advice of clergy, doctors, and even the Bible and other books is sought before the advice of professional counselors. Add to this the growth of the self-help movement, and professional services most likely represent only a fraction of old and new helping efforts.

The authors document the tremendous growth in the variety of helping services for families. In the presentation, you cannot help but notice that the

service sector may be slipping away from social service professionals trained to provide help. Families are talking for themselves and making their own service provision, and one wonders if the profession is listening. A new era in service provision has dawned, and the social work profession must tap into it if it wishes to stay attached to mainstream services. Private family service agencies may be a thing of the past. Self-help groups and efforts by individuals to better themselves are now firmly entrenched in the service marketplace.

Kahn and Kamerman's study is admittedly exploratory. It was carried out over a period of three years. They asked general questions: What are family support systems? What do families say they need or want? What kinds of services do families seek? They went to the public sector, to voluntary nonprofit social agencies, to church programs, to the self-help movement, and to profit-making agencies to develop a complete review of service delivery. A chapter is devoted to each of these service sectors.

The book's major contribution is simple yet profound. It places the efforts of human service professionals in their broadest context. While the average service provider would not place dating services, encounter groups, and private therapeutic help in the same spectrum, the basic rationale for doing this holds up. Families seek help in a wide variety of ways. Too often we act as though what we do is clearly mandated and the only way in which people get help. Although the profession does have connections to natural helpers and to the self-help movement, these movements developed outside the profession. Others are telling us what to do.

Kahn and Kamerman call for a holistic approach to the problems of families. "The notion of family support presented here is not treatment or maintaining functioning for the severely ill, handicapped, disturbed or disordered" (p. 9). The question remains, What does social work do best, and which tasks in this broadest context of helping should be developed?

To their credit, the authors recognize that personal social services must never be viewed as a substitute for adequate income, jobs, health or medical care, or housing. The costs of social intervention should never be put ahead of the costs of social benefits. They return to this point in the concluding chapter to keep their recommendations in perspective.

What are their recommendations? The authors realize that the explosion in the helping services will not dissipate and cannot be brought under the control of one service system. They encourage continued innovation in social intervention. They suggest some initial typologies for organizing a system of services for families (acute-chronic, normal life cycle-transitional, the development of words such as "preventive," "developmental," "enhancement," and "secondary prevention"). Clearly, more conceptual work is needed on how we might think of all this as a service system, if, in fact, we are given the luxury of thinking in such terms in this time of cutbacks. Kahn and Kamerman see a need to develop far more practical services designed to alleviate some of the stress for families in managing their daily lives. This is an extremely important mandate for the profession. We must get back to the basics in these times. For example, what is counseling? The authors have found that "although counselling is common (and reimbursed under Title XX), the term apparently refers to the interviews connected with applications, referral, and access to other services, not to intensive interpersonal help" (p. 99).

The authors direct our attention to a critical area—funding and changing funding patterns that have already affected and will continue to affect all service programs. In particular, we are directed to track public money supporting the private not-for-profit sector and third-party reimbursements monies through private insurance and public medical programs. We are encouraged to think

in terms of a system and examine the mesh among the public, private for-profit, and private not-for-profit sectors. It may be even more crucial that we ask basic questions, such as what will happen to the social work profession and what will happen to the low-income consumer as these funding patterns are realigned.

In concentrating on universalistic themes, which is an important contribution, Kahn and Kamerman have not focused adequately on the special problems of those who are disadvantaged in the service marketplace because of class, race, sex, or ethnicity. In the excellent review of quality-of-life data for families, we are told that "Blacks tend to report less satisfaction than whites" (p. 21). If services should be individualized to meet the specific needs of types of families or local communities, surely race and class factors must be taken into account in service delivery. There is a difference between middle-class families where therapeutic services might be sought out, and low-income families where therapy would never be considered. Indirectly, the authors address these issues when they call for fewer treatment services and more information, advice, education, and practical assistance.

The special problems of women are also given insufficient emphasis. As the authors observe, the majority of social service clients are women, and this is consistent with the family ideologies and practices of modern societies. Although "women are politically inactive and weak" (p. 240). Regardless of the truth of these statements, everyone should have the responsibility to challenge a society's assumptions, and at least point out how women's situation could improve with more power and if society had a less stigmatized view of women. Until that happens, we still run the risk of providing services that blame the victim. Paternal deprivation has never been taught to future human service practitioners.

It is disappointing, too, that the authors did not address the broader political and economic issues presented by Reaganomics and did not at least project the effect that block grants will have on all service sectors. They are apologetic for this, as they felt they did not have the time to adequately assess the effects of the president's policies. In addressing the dependency of all service sectors on public funding, however, they do address Reaganomics indirectly. "The future is not an optimistic one, especially for those families who need more than transactional analysis or a 'rap group'."

We will undoubtedly hear more from both authors on social services in the United States, and their first effort is descriptive and exploratory. The authors provide excellent descriptions of human service programs. The chapters on church-related programs and on the self-help movement are especially good. The book could be used as a text or as a major source in an overview course on traditional and innovative service delivery to families in this country.

As they recognize, their analysis needs to proceed from the descriptive to the analytic. Their program descriptions are based primarily on the self-reports of people who run the programs and who tend to be overly enthusiastic about their programming. More data are needed on the evaluations of the programs they have described. This is exactly what Kahn and Kamerman recommend. Differential and separate program evaluations that examine the individual substantive program base of diverse programs such as marriage encounter weekends, family therapy, family life education, and child care programs are called for. As the authors suggest, basic questions about the value of the helping process need to be addressed: Is there demand? Is the service take-up? Do consumers return? We should never retreat from the current trend of asking the consumer. We need to examine both sides of the

service equation. Viewing the service contract as a legal contract helps assure more protection for both the consumer and the service provider.

Now that Kahn and Kamerman have set out on this course, the greater task remains. They must develop a better conceptual framework for viewing the variety of programs, service tasks, and activities for families. I hope their final conception is responsive to the basics of what social service professionals do well and why they should remain in business.

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Things That Matter: Influences on Helping Relationships Edited by Hiasura Rubenstein and Mary Henry Block. New York: Macmillan Publishing Co., 1982. Pp. ix+446. \$10.95.

As a book about "helping relationships," this one is unique. Most texts dealing with this subject focus on the nature and acquisition of particular skills in the development and use of the helping relationship. This book does not address these tasks, but is concerned with the more basic issues of the feelings and attitudes of helping persons that must inevitably affect their ability to achieve a congruity and genuineness in their work and an acceptance of others through the exercise of empathy. Thus the book is true to its title: *Things That Matter: Influences on Helping Relationships*. The book is not a text in that it tells the reader what the correct feeling and thinking may be. Rather, it is a collection of readings that may be used by a skillful classroom teacher to guide students in exploring what they believe and what they feel about some of the central issues in the helping relationship, about "the things that matter." The authors have tried not to present any easy answers to students but have attempted, through the presentation of conflicting evidence and differing opinions, to challenge the readers to think about their stance on these issues. This gives the classroom teacher material for some stimulating student discussion and the students something for thoughtful self-examination.

The book has an introduction, conclusion, and thirty-six chapters divided into six sections. Each section has its own introduction to the central topic of that section and a conclusion in which the authors discuss some of the questions and implications for social work suggested by the readings. The authors have collected readings that touch on such topics as race, social class, gender, power, authority, dependency, and organizational context. All are important to social work relationships, and I suppose that each reader will find favorites among them. As in all edited books, some articles are better written and more powerful than others. The articles presented on race, social class, and gender should serve as a starting point for some intense class discussions that will at least aid students in being more self-aware, if not more understanding of the impact of these basic human differences on the way people go about living their daily lives. I wish that there were more powerful statements in this area than those presented here, but I have no idea where one can find them. Perhaps I feel this way because I have used these articles for a long time and wanted new material. Others may find them exciting. At least they are some of the best available. One of the strengths of the text for use with social work students, particularly those in direct practice, is the section on "The Organizational Context of Helping." It is often difficult to help students understand the critical importance of the organizational climate—to see themselves as a part of and influenced by a particular delivery system and not as just a client and worker.

together cut away from the reality of the setting within which they come together

In a brief review, one cannot touch on the importance of each article. There are three, however, in addition to those above, that should be mentioned. Helen Perlman's article on relationship is the first article in the book and sets the tone of the total collection. It is truly a gem that all social workers should read. The importance of the Mayer and Timms article on the "Clash in Perspective between Worker and Client" cannot be overemphasized. How hard it is to help students to consider that what they want for the client may not be what the clients wants for him or herself! Yet nothing else is more critical to social work process and more central to differentiating social work practice from other professions and from the medical model of practice. The third article is Leston I. Havens's article on "Dependence: Definitions and Strategies." Again and again over a semester of practice classes—in fact, over a whole year or two years of social work education—one meets the student's fear, expressed in many ways, of "making the client dependent." It is time the Havens statement, with its discussion of how grossly dependent we all are, became a part of social work literature.

I would highly recommend that teachers of practice courses, both core and advanced, as well as field instructors read this book and consider how they might use it. It should be stimulating to practitioners and all teachers as well as to the students. It is a collection that deals in a productive and stimulating way with "things that matter."

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Freud and Women By Lucy Freeman and Herbert S. Streeb. New York: Frederick Ungar Publishing Co., 1981. Pp. xiii+238. \$14.95

Since the 1920s, Freud's views about women have consistently aroused intense debate within academic, literary, and psychoanalytic circles. As Freeman and Streeb state in their introduction, "He has been praised for leading women to sexual and emotional liberation and attacked for his antifeminist, denigrating attitudes toward women. There are those who insist Freud changed the concept of women from passive, inhibited frightened creatures chained to children and kitchen to that of a human being entitled to equality with men, while others accuse Freud of viewing women as second-class citizens who wish to castrate men" (p. xii). The reader begins this book, therefore, with great anticipation, not only because the subject matter is timely, controversial, and inherently interesting, but because both authors bring to this work considerable acquaintance with psychoanalytic theory and technique, as expressed by each in some of their earlier writings.

Freeman and Streeb embark on the important task of examining factual details about Freud's personal relationships with female family members, friends, colleagues, and patients in order to "try to reveal faithfully and to evaluate objectively those attitudes toward women that affected Freud's theories about the emotional conflicts and psychosexual development of the female sex" (p. xiii). To this aim, the book is organized into four sections, each with a number of chapters. The first section covers his relationships with his mother, nurse, sisters, premarital girlfriend, wife, sister-in-law, and three daughters. Part II examines his associations with female friends and colleagues, including Hilda Doolittle, Marie Bonaparte, Lou Andreas-Salome, Joan Riviere, and Drs. Helene

Deutsch and Ruth Mack Brunswick. Part III includes a discussion of his relationships with a number of his female patients, while Part IV evaluates Freud's overall contributions to understanding women.

The book's success in achieving its ambitious goal is mixed. In terms of its strengths, it is clearly written and generally engages the reader. The authors have provided an important service by bringing together in one volume a discussion of Freud's relationships with a range of women—from relatives, to friends, to colleagues, to patients. The breadth of coverage, therefore, is comprehensive. There is also a directness in acknowledging when the factual data about Freud's relationships with certain of these women is fragmentary and inadequate. Finally, engaging photographs of Freud and of these various women in his life are effectively interspersed throughout the text.

At the same time, there are clear problems with the scholarly level of the volume, both in terms of form and of substance. Regarding the former, although the authors are always careful to cite the author and enclose direct quotes within quotation marks, there are no footnotes in the book and no page references for the quotes. At times, the source of factual data is not provided. This failure to provide adequate citations is sometimes coupled with the failure to provide sufficient context for the quotations used. A striking example of this flaw is found at the end of the chapter on Freud's mother, entitled "The Oedipal Conquistador," where the authors state, "He once told his friend and colleague Theodor Reik, 'What this world needs are men of strong passions who have the ability to control them'" (p. 20). The next sentence is the authors' interpretation: "He was speaking of himself, in relation to his mother" (p. 20). Although this explanation might well be quite plausible and appropriate, the reader is not given sufficient context to make an informed judgment.

Regarding substance, there are also a number of difficulties. Since the book can be reasonably categorized as a partial biography, there are certain expectations about that genre that should be met. First, there should be adequate consideration of the context of the subject's life. While Freeman and Streehn do discuss his family relations in more detail, and give at least minimal recognition to the influence of the overall context of the Victorian Era, more could have been made of the latter. Carl F. Schorske's excellent recent book, *Fin-de-Siècle Vienna: Politics and Culture* (New York: Alfred A. Knopf, Inc. 1980), which has a fascinating chapter on Freud, convinces the reader that a consideration of the Viennese cultural milieu of Freud's day is essential background for understanding the man and his work.

Second, there are problems with evidence. Not only should a good biography be well documented, but it should at best include some new evidence or at least provide a new or different interpretation of already familiar evidence. *Freud and Women* is disappointing in these areas. Although unearthing new data on Freud's life is clearly a formidable task, this book relies heavily in Parts I and II on secondary interpretations. Although the authors acknowledge special interviews with Edward L. Bernays, Freud's nephew, minimal reference is made to the data from these interviews in the text. Apparently no other individuals were interviewed, or if they were, there is no reference to them. The intellectual caliber of the book would have been improved had the authors more often questioned a preexisting interpretation from a secondary source. The prevailing tendency is rather to summarize other authors' interpretations, without providing their own position on the topic. Part IV, which evaluates Freud's overall contribution toward understanding women, suffers from the reverse problem. In this section, the authors generally fail to place their own analysis within the context of prevailing interpretations of the same material.

For the most part, then, this is not a discriminating or exacting summary of the factual data about Freud and women

In addition, although a page and a half of books that the authors consulted are referenced at the end of the volume, none of the many journal articles about the subject are listed. Earlier, the breadth of coverage was cited as a strength of the book. However, because the depth of the evidence is so shallow in some cases, especially for Freud's nurse Nannie, his premarital girlfriend Gisela, and Joan Riviere, these chapters should have been omitted.

Because of the problems of form and substance, cited above, this book seems best suited as a general introduction for the uninitiated. It is readable and covers an interesting and wide-ranging territory. However, it lacks the depth of presentation that readers, already knowledgeable about Freud's personal biography and theoretical stance on women, would desire. For this particular audience, the book will be enjoyable, though not challenging, reading.

Leslie B. Alexander
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Evaluating Practice: Guidelines for the Accountable Professional By Martin Bloom and Joel Fischer. Englewood Cliffs, N J: Prentice-Hall, Inc., 1982. Pp. xi+512. \$24.95.

Over the past fifteen years, numerous prominent social work educators and researchers have spoken and written about the "goodness to fit" between single-case research methodology and social work direct practice. Despite all of the words and pages calling for an integration of research and practice, none of us has exactly been overwhelmed, unfortunately, by practitioner response. Simply suggest undertaking systematic case-by-case evaluation to the overextended social services worker with a caseload of seventy-three, or to the children's therapist who has just gotten kicked in the ribs by a hefty ten-year-old, or to a social work student who is frustrated in his attempt to sort out when to be empathic versus task focused, or nondirective, or confrontational, or to overcome his personal shyness to do anything at all, and some of the reasons that the practice community is not wholeheartedly embracing tenets of single-case evaluation will become apparent. The main ones are likely to be (1) that the realities of practice are too complex to be evaluated by counting behaviors (or even feelings or thoughts), and (2) that it takes too much time and effort.

As a practitioner who sometimes evaluates her practice, and as a social work educator who routinely and doggedly teaches single-case research methodology, I believe, along with Martin Bloom and Joel Fischer, that research methods can be used by practitioners to lighten rather than add to their already taxing burdens. There are ways, for example, to record intervention activity and client progress that sharpen one's awareness of the intervention process and guide one as to what to try or what not to try next.

Bloom and Fischer have written a research text for practitioners—a legitimate research text that honors the discipline, compulsiveness, and scrutiny that is necessary for the practice of science and also repeatedly underscores the flexibility of single-system designs, the ways in which practitioners can judiciously use aspects of single-system research methodology rather than blindly follow rules and procedures that make no sense given the client, the problem, or the context. The authors prefer the word "system" because it clearly communicates that targets of evaluation can be any single system—an individual, family, group, organization, or community.

The book is organized into five parts and twenty-three chapters. Part I addresses the desirability and possibility of integrating research and practice, Part II contains nine chapters on measurement, Part III focuses on design alternatives, Part IV contains a detailed discussion of issues and options in data analysis, and Part V is a summary chapter highlighting the benefits of single-system evaluation for clients, administrators, educators, and students. Each chapter begins with a statement of purpose, an outline of content, and an introduction. Clear discussions of the issues at hand are usually liberally supplemented by graphic illustration—flow charts, lists, tables—and case illustrations. Unfortunately, not many of the case illustrations are likely to remind practitioners of their own cases. Chapters conclude with a brief summary and a set of useful practice exercises.

There are at least two major pitfalls to be avoided in writing a book like this. One is oversimplifying—hitting the high spots and treating practitioners as if they were intellectually inferior and unable to grasp the finer points of the research enterprise. The second is overcomplicating—including every little detail and nuance that has ever risen to consciousness regarding the research process and telling the practitioner much more than she ever wanted or needed to know about evaluating her practice. For the most part, Bloom and Fischer carefully and deftly develop their content in the middle ground between these two extremes. Doing that is not an easy job and I think, realistically, that it cannot always be done. The book starts out on an upbeat note, and one is quickly engaged by the friendliness and openness of the author's attitude. But before long, the reader is unavoidably led into the more discomforting territory of interrater reliability, moving averages, concurrent baselines, autocorrelations, and all the rest. Bloom and Fischer provide an impressive array of design, measurement, and analysis options. To the uninitiated, all of these possibilities and their various pros and cons may seem overwhelming, and to the "career skeptic," they may only confirm the view that empirically oriented approaches to practice are still largely a matter of technical trivia. As a research instructor, I read this book and thought it was terrific; as a practitioner, I sometimes felt a little let down. But having forgiven the authors for not always capturing the subtleties or complexities of practice (something they never intended to do), I could then go on to fully appreciate the richness of the resource they offer to practitioners who know their business—and especially to instructors of empirically oriented approaches to practice. The practice instructor who attends to issues of accountability and development of practice knowledge and the research instructor who knows about practice will be able to help their students sort through options, adapt procedures, focus on client needs, and make good use of this book.

Evaluating Practice is a research book that a practitioner (at least an interested and flexible one) could easily use to help decide what evaluation possibilities best fit the given situation or to help clarify what design she is already using and what information about problem change she is attending to. She may or may not ever have occasion to use a changing-criterion or ABAB design, or have access to an additional observer in order to make a reliability check, but if she makes accountability to the client her first priority, she will find a lot of ways to use and adapt Fischer and Bloom's guidelines.

It may be unrealistic to think in terms of the practice community ever enthusiastically endorsing single-case methodology. For one thing, the subject matter just does not have that kind of appeal. Still, to the trained eye, there are signs that the move to teach practitioners to evaluate their practice is gaining ground. With *Evaluating Practice*, Bloom and Fischer further advance the possibility that increasing numbers of social workers will selectively use

research methodology to become more acute observers, careful thinkers, and creative intervenors.

Sharon Berli

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Social Work and Health Care Policy. Edited by Doman Lum. Totowa, N J: Allanheld, Osmun & Co., 1982. Pp. xvi+224. \$24.95 (cloth); \$11.95 (paper).

In light of the newly approved curriculum policy statement of the Council on Social Work Education mandating specialization for graduate schools of social work, and the increasing number of schools that are including health as one of the concentrations in their curriculum, Lum's volume provides the academic community with a valuable, timely text. For the approximately 40,000 social workers employed in health care, *Social Work and Health Care Policy* is a concise, informative reference source on health policy issues. It serves to better inform social work's participation in shaping health policy decision and to affirm the central and critical role that the social work profession must play in the health care process.

The book is divided into three parts. Part I provides a conceptual framework in which definitions of health policy, an examination of the major policy issue and problems that social work confronts in health care, social values, and social work's contributions to health policy development and implementation are presented. With this framework Lum provides the foundation for understanding health policy from the perspective of social work. In addition, a policymaking framework for health care is offered.

Contributions of leading policy experts with social work or public health backgrounds comprise Part II. Each of the authors focuses on a specific policy program area, provides essential background, and reframes current, selective policy issues for this decade, along with giving strategies to cope with recurrent problems. Commencing with a broad survey of national health policy structure and agendas for the 1980s, succeeding chapters address the major issues and prospective trends in Medicaid, Health Maintenance Organizations, national health planning and resource development, primary health care, cost containment, national and state health insurance, and future trends in health policy.

In Part III the editor seeks to synthesize recurrent themes for health care policy and social work as reflected in legislation and programs. He identifies priorities and social work roles and tasks related to critical areas of decision making, as well as unfinished policy agendas, with the recognition that the policy issues require continual updating and reframing. Lum begins his "Summary and Conclusions" with an analysis of the National Health Care Reform Act of 1980 as reflecting the Reagan administration's approach to a health policy plan and offers a projection of probable health policy for the remainder of the decade.

The diversity of perspectives and emphases contributes to the strength and interest of the volume. Each contribution is an in-depth scholarly study of the particular program policy area, resulting in many suggestions for policymaking. For example, the reader has the data to reconsider the finding that funding reimbursement and regulatory policies interfere with physicians' ability to exercise professional judgment and contribute to their increasing withdrawal from Medicaid programs. Will reform of Medicaid legislation encourage physicians' participation and thereby provide access to private care

for the poor and near poor efficiently and effectively? Or does one support Harrington's contention that access, cost containment, and quality care can be achieved only through expanded power and control of health services and facilities through extending the authority of the health systems agencies to include the regulation of the number, distribution, and types of physicians? Despite the intentionally imposed limitations on health planning legislation and the challenge of developing and retaining the involvement of informed consumers, health systems agencies are affirmed to be the sole vehicles of nationally coordinated health service facilities, manpower, and costs.

A recurrent theme is the need to develop alternatives to the medical model and to shift budgetary allocation from traditional treatment programs to nonmedical determinants of health (e.g., environmental change, preventative health, and life-style, with self-help and self-care components). For those who accept that health dollars are not infinite, I assume that there is consensus among us about the appropriateness of this stance. I believe that it is possible to meet the population's needs for health care with changes in national policy emphasis, through gradual incremental change, and with an integrative approach to support a variety of service systems, thus striking a viable balance between appropriate government regulation and free-enterprise market competition. In contrast, Katz views the improvement in health status as requiring basic social change and philosophic reorientation, as proposed in his "transformist" scenario, for which he presents a detailed plan.

The attention given to contributions to social work from the numerous program policy perspectives is an important component of this volume and is addressed by virtually all authors. For me, this becomes most interesting and useful when considered within the context of program and when the author has a sophisticated knowledge and appreciation of what clinical practitioners do, can do, and should learn to do. From this perspective, Peter Hookey's chapter on "Primary Care" is very appealing. Achieving the integration of policy and practice for social workers, the majority of whom are in direct practice, has been an ongoing challenge for educators. It has been my experience that this integration takes place particularly for clinical students and workers as they connect policy issues to the delivery of services to their clients. "Macro" policy without translation to the service-delivery system tends to remain "context," and thus may have only limited impact on changing worker attitudes and behaviors. Advocacy for clients within health care systems and in other systems is, I hope, well established in the skill repertoire of health care social workers.

The implementation of shifts in policy emphases with the need to develop the knowledge and value informing skill in nontraditional roles of hospital-based clinicians demands the attention of practice and education if social work is to continue to contribute to health care. It is for this reason that I speculate on the advantages of the complex hospital system (where the majority of social workers are employed and will be for some time to come) where social workers, responsive to the needs of patient populations, have expanded their traditional clinical roles and relationships to physicians and services. Here, workers undertake primary-care functions in departments of pediatrics or obstetrics and are involved in health screening with physician and nurse colleagues, in health education programs, in collaboration with community agencies to coordinate care, in employee assistance programs, as representatives to health systems agencies, and as outpost workers to community agencies and to groups of physicians. At this level, policy becomes increasingly useful for practitioners and augurs for greater practitioner activity in shaping policy, which in turn will enhance service to clients.

It seems clear to me that identity issues for our profession and those issues related to our survival have resulted in a pattern of practice within health institutions that has brought us to identify too closely with the goals of medicine and the power of the hospital. This has clearly affected the curricula of schools seeking a curriculum for practice.

Given the move toward specialization in social work education, I believe we will have increased opportunity to educate self-directed practitioners who can participate as full partners in whatever interprofessional mix is appropriate to the systems in which they function. They will be responsive to the changing needs of populations in existing and emerging patterns of care. The challenge to developing curriculum—class and field—to achieve this objective is formidable. *Social Work in Health Policy* is a rich and effective resource that clearly supports an emerging approach to practice.

Phyllis Caroff
Hunter College

Brief Notices

Evaluation and Prevention in Human Services. Edited by Jared Heilmann and Jonathan A. Morell. *Prevention in Human Services*, vol. 1, nos. 1(1/2), Fall/Winter 1981. New York: Haworth Press, 1982. Pp. 120. \$20.00.

With an increased emphasis on accountability, this issue focuses on the evaluation of primary prevention. It examines both program designs and assessment instruments.

Ethical Decisions for Social Work Practice. By Frank Loewenberg and Ralph Dolgoff. Itasca, Ill.: F. E. Peacock Publishers, 1982. Pp. xi+126. \$7.95.

A brief overview of a variety of ethical issues related to social work practice. It includes a series of examples of common ethical dilemmas in the profession, with an emphasis on clinical social work.

The Welfare State and Canadian Federalism. By Keith G. Banting. Toronto: McGill-Queen's University Press, 1982. Pp. xii+226. \$22.50 (cloth), \$12.95 (paper).

This volume documents the effect of federalism on the development and implementation of Canadian social security policies. Of special interest is the author's discussion of the role of income security programs in the day-to-day life of the Canadian populace.

Toward Achieving Equity for Women in Social Work Education: A Conceptual Frame of Reference for Organizing Equity Efforts. By Nancy Coleman. New York: Council on Social Work Education, 1982. Pp. x+53. \$6.00.

The report of a two-year project concerned with the inequities experienced by women in social work education. Issues such as recruitment, promotion, student admissions, field placement, and financial aid are identified. Five strategies are offered to help overcome such inequities.

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Professional Power and Social Welfare. By Paul Wilding. Boston: Routledge & Kegan Paul, 1982. Pp x+169 \$9.95

An examination of professional power within the context of social welfare. The author concludes that the only successful relationship among professions, clients, and society is one of partnership

Helping: Human Services for the 80's. By Frank Baker and John E. Northman. St. Louis, C. V. Mosby, 1981. Pp x+241 \$12.95.

A general introduction to the human services field. Designed for both students who are new to the subject and those who have had related work experience

The Social Welfare Forum, 1981: Official Proceedings, 108th Annual National Forum on Social Welfare. San Francisco, June 7-10, 1981. New York: Columbia University Press, 1982. Pp ix+244 \$27.50.

Representative selections from among the speeches and papers presented at the 108th annual forum

Children and Families in the Social Environment. By James Garbarino. Hawthorne, N.Y.: Aldine Publishing Co., 1982. Pp xiv+296 \$24.95 (cloth), \$14.95 (paper)

Using an ecological approach to human development, this volume treats the family as a social system interacting with other systems in its environment. Prevention, enhancement, and health promotion are suggested as ways to improve human quality.

Reference Sources in Social Work: An Annotated Bibliography. By James H. Conrad. Metuchen, N.J.: Scarecrow Press, 1982. Pp. vi+201. \$15.00.

Contains 656 references in social work and social welfare. A helpful resource for anyone concerned with delivering human services.

Open Care for the Aging: Comparative International Approaches. By Virginia C. Little. Springer Series on Adulthood and Aging, vol. 11. New York: Springer Publishing Co., 1982. Pp. viii+132 \$17.95

An in-depth analysis of the structures and philosophies of existing systems of care for the elderly in four countries. The study includes statistics of the programs as well as those of attitudinal response of the populations involved

Research Methods in Social Work: An Introduction. By Charles R. Atherton and David L. Klemmack. Lexington, Mass.: D. C. Heath & Co., 1982. Pp. ix+330. \$15.95.

Written with the idea of reducing some of the apprehension and frustration experienced by many social work students about research. The chapters on statistics have been written with the nonmathematician in mind.

Coordinating Community Services for the Elderly: The Triage Experience. Edited by Joan Quinn, Joan Segal, Helen Raisz, and Christine Johnson. New York: Springer Publishing Co., 1982. Pp. xiii+125. \$16.95.

A volume reporting on the Triage project, a system that coordinates the delivery of health and social services for the elderly by adapting to meet the needs of the individual client.

Family Therapy: Major Contributions. Edited by Robert Jay Green and James L. Fraino. New York: International Universities Press, 1982. Pp. xvii+564. \$20.00.

An anthology of eighteen major contributions to the field of family therapy.

Achievement and Women: Challenging the Assumptions. By Debra R. Kaufman and Barbara L. Richardson. New York: Free Press, 1982. Pp. xiv+188. \$19.95.

One of the common assumptions challenged in this volume is that the motive to achieve is firmly anchored in early childhood. The authors claim that achievement is an ongoing process that reflects the changes experienced throughout one's life.

Social Groupwork and Alcoholism. Edited by Marjorie Altman and Ruth Crocker. New York: Haworth Press, 1982. Pp. 92. \$16.00.

A selection of papers that discuss groups that work with alcoholics through interpersonal means. Their emphasis is on achieving sobriety and a return to health for the alcoholic, as well as restoring family relationships.

Basic Statistics in the Human Services: An Applied Approach. By Ann E. MacEachron. Baltimore: University Park Press, 1982. Pp. x+240. \$24.95.

An introductory statistics text for students in the human services designed to serve as a reference after being used in a course. It achieves these ends by employing decision-making charts and by emphasizing the conceptual understanding and interpretation of statistics and computer analysis.

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Shelby Cullom Davis Center for Historical Studies
Princeton University

CHARITY AND WELFARE

For the two years 1984-85 and 1985-86 the subject of the Seminar of the Shelby Cullom Davis Center for Historical Studies at Princeton University will be *Charity and Welfare*. The Seminar will focus on the following problems:

1 *Intellectual History*. A comparative study of changing ideas about the scale and function of charity over time and space, ranging from medieval theology about charity to the ideals behind the full 20th century Welfare State, and finally to the current reaction against it, and arguments for and against the redistribution of wealth between Western and Third World nations. Included will be assessments of the relative roles of benevolence and social control as motives among the donors.

2 *Social History*. Examination of how responsibility for the poor, the sick and the unemployed has shifted over time between the family, the parish, the locality and the state. This will include attitudes and actions of the recipients of aid, as well as a study of their changing empirical conditions and numbers.

3 *Political and Institutional History*. An examination of the changing relationship of the state to problems of poverty and other forms of dependency, the creation and working of private and public charitable institutions of every kind, and the causes and consequences of the recent creation by the state of a large bureaucracy of the "helping professions."

4 *Economic History*. An examination of the quantity of a society's resources which have been devoted to various forms of internal welfare and international aid, and of the ways these resources have been deployed.

It is hoped that the topic will attract scholars from many disciplines as well as history.

The Center will offer a limited number of Research Fellowships for one or two semesters, running from September to January and from February to June, designed for highly recommended younger scholars, as well as for senior scholars with established reputations. Candidates must have finished their dissertations and must have a full-time paid position to which they can return. Fellows are expected to live in Princeton in order to take an active part in the intellectual interchange with other members of the Seminar. Funds are very limited, and candidates are, therefore, strongly urged to apply to other grant-giving institutions as well as the Center.

Inquiries and requests for Fellowship Application Forms should be addressed to the Secretary, Davis Center for Historical Studies, 129 Dickinson Hall, Princeton University, Princeton, N.J. 08544, U.S.A. The deadline for fellowship applications and letters of recommendation for 1984-85 is December 1, 1983, and for 1985-86 is December 1, 1984. Scholars who are not applicants for Fellowships but would like to visit Princeton to offer a paper to the Seminar are asked to write to the Director.

LAWRENCE STONE, *Director*

Justice for the Welfare Recipient: Another Look at Welfare Fair Hearings

Jan L. Hagen
University of Minnesota

Based on the adversarial model of justice, welfare fair hearings serve as one mechanism for insuring administrative justice in public assistance. This study examines the use of due process procedures by applicants and recipients of welfare in welfare hearings. The findings indicate that petitioners who retain legal assistance make use of procedural due process in advancing their cases at welfare fair hearings. However, for self-represented petitioners, the fair hearing mechanism has severe limitations as a method for redressing grievances.

Welfare fair hearings serve as one method for protecting individuals' rights and for promoting administrative justice in public assistance. Administrative justice, defined by Hoshino as "fairness in the rules and practices of administrative agencies,"¹ is directly concerned with "fairness in the exercise of discretion" by public officials² or, as termed by Davis, discretionary justice.³ The fair hearing serves primarily as a grievance mechanism designed to insure a form of recourse for those dissatisfied with agency actions. As adjudicatory proceedings, welfare fair hearings are like trial hearings but allow the relaxation of one or more of the usual requirements for trials. Based on the adversarial model of conflict resolution, they incorporate both the strengths and limitations of that model.

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An analysis by O'Neil highlights the values served by the adversarial system.⁴ Viewing accuracy and fairness as the overriding values served by the adversarial system, he finds that the quest for truth is facilitated by the opportunity for an individual to disprove any falsehoods and to present evidence bearing on the facts. In addition, by operating with an impartial tribunal, the adversary system works to insure accuracy, an essential component of fairness and justice. Additional values served are agency accountability, visibility, impartiality, and integrity.

Despite O'Neill's analysis, serious challenges may be raised about the effectiveness and appropriateness of the adversary model for welfare claims. Welfare hearings are not required for every agency action that is adverse to the client. Instead, the client must specifically request a fair hearing. However, a rather consistent research finding has been that clients are either not informed about their right to appeal or have forgotten what they are told.⁵ Obviously, those unaware of the appeals procedure, for whatever reason, cannot use the fair-hearing mechanism. Thus, lack of awareness is a serious impairment to clients' effective utilization of the adversary process. All of these lead to a low rate of appeal that works against accuracy and fairness within the welfare system.⁶

Additional criticism of the adversary system of justice points out that establishing the truth rests on the outcome of individual confrontations, often between unmatched advocates who are striving to promote their clients' cause rather than truth. Such a system results in an inequitable, risky endeavor with unpredictable outcomes.⁷ A central question in analyzing the appropriateness of the adversary model for welfare appeals concerns the ability of the client to function effectively as an adversary. Wickham stated that "[clients are] not equipped with the knowledge or argumentative skills necessary to be an equal adversary. Although it is normally assumed that an adversary proceeding is the best legal vehicle to discover the truth, this presumption may not be valid in welfare proceedings. . . . It is contradictory for the welfare recipient to treat the agency as his opponent, since the same agency dispenses his benefits."⁸ Not only are the system and its regulations difficult to understand, but clients must be willing to risk confrontation with and possible future reprisals from those directly involved in determining their benefits.⁹

The adversary model assumes an impartial, passive decision maker. Mashaw's analysis, however, points out that the decision maker in welfare adjudications is charged with correctly implementing the program. He thus must actively seek the information needed to render a decision.¹⁰ In fulfilling this investigative role, the decision maker may further compromise the adversary model by inquiry into areas that are irrelevant to the presenting issue.¹¹

This study examines welfare fair hearings to determine the extent to which certain elements of procedural due process are utilized by

applicants and recipients of public welfare during the hearings. Although the right to procedural due process is implied by the fair hearing requirements of the Social Security Act, has been actively advocated by legal scholars, and has been required in certain instances by the U.S. Supreme Court,¹² relatively little is known about the extent to which these rights are actually exercised by applicants and recipients during welfare hearings, and what, if any, influence that exercise has on hearing outcomes. In addition, the study provides further information about the length of hearing time, the frequency of hearing attendance, and hearing outcomes. The relationships among these variables and several others, such as petitioner sex, type of public assistance program, and the issue raised on appeal, are also examined.

Procedural Safeguards

As part of the original Social Security Act of 1935, fair hearings were required for all the public assistance titles in the act.¹³ However, they were enjoined only for denials of assistance and conducted in accordance with vague standards.¹⁴ Over the years, various federal requirements have been delineated, but, as several studies have documented, these requisites were frequently not implemented by the states¹⁵ or, if on the "books," were not followed in practice.¹⁶

The central development in fair hearing procedures for welfare applicants and recipients was the 1970 U.S. Supreme Court's decision in *Goldberg v. Kelly*.¹⁷ This decision outlined the due process procedures required prior to the termination of a welfare recipient's benefits. The specific issue before the Court in *Goldberg v. Kelly* was whether an AFDC recipient was entitled to an evidentiary hearing prior to the termination of benefits. In other words, did the due process clause of the Fourteenth Amendment require an opportunity for a hearing before benefits were terminated? The Court answered the question on the basis of an interests-balancing test: "The extent to which procedural due process must be afforded the recipient is influenced by the extent to which he may be 'condemned to suffer grievous loss' (Joint Anti-Fascist Refugee Committee v. McGrath, 341 U.S. 123, 168 (1951) Frankfurter, J., concurring), and depends upon whether the recipient's interest in avoiding that loss outweighs the governmental interest in summary adjudication."¹⁸ In applying this test, the Court held that to provide the welfare recipient with procedural due process, an evidentiary hearing prior to termination of benefits is necessary.

The Court also outlined the procedural safeguards required in a pretermination hearing to insure due process: (1) timely and adequate notice specifying the reasons for a proposed agency action; (2) an

opportunity to confront and cross-examine adverse witnesses; (3) an opportunity to present argument and evidence orally; (4) the right to retain counsel; (5) a request that an impartial decision maker's conclusions must rest on the legal rules and evidence presented at the hearing, and a requirement that the decision-maker must state the reasons for his determination.¹⁹ With the exception of an open or public proceeding, the due process procedures required by the *Goldberg* Court included the major elements generally recognized as components of a hearing in a regular trial.²⁰

At present, the fair hearings for federally funded public assistance programs are required to comply with the due process procedures delineated in *Goldberg*. In addition, the state plans under the Social Security Act's provisions for public assistance programs must comply with the federal statutes requiring states to provide an opportunity for fair hearings.²¹ The statutory and constitutional requirements for fair hearings are specified in the federal regulations.²² These regulations incorporate the *Goldberg* requirements and, in general, require the following: (1) applicants or recipients must be informed of their right to a hearing and to representation by legal counsel, relative, friend, or other spokesperson at the time of application and at the time of any action affecting their claim;²³ (2) timely and adequate notice must be given when the agency plans to discontinue, terminate, suspend, reduce, or change the manner or form of payments;²⁴ (3) an opportunity for a hearing must be granted with reasonable promptness when an applicant requests a hearing because his or her claim is denied or not acted upon, and when a recipient is aggrieved by an agency action resulting in suspension, reduction, discontinuance, termination, or change in the manner or form of payment;²⁵ (4) the hearing must be conducted by an impartial official who has not been directly involved in the initial determination of the action in request;²⁶ (5) the petitioner or his representative must have the opportunity to examine his case file and all documents and records to be used by the agency at the hearing, to present his or her case with or without aid of a representative, to bring witnesses, to establish pertinent facts and circumstance, to advance arguments, and to question or refute any testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses;²⁷ and (6) the decision of the hearing officer must be based on the evidence and other material introduced at the hearing.²⁸

Methods

The unit of analysis in this study is the Minnesota state-level welfare hearing. This fair-hearing system deals with petitioner grievances in

Aid to Families with Dependent Children (AFDC), Food Stamps, General Assistance (GA), General Assistance—Medical Care (GA—MC), Medical Assistance (MA), Minnesota Supplemental Aid (MSA), and Social Services. Although the federal regulations may vary among the various programs or not apply to a particular program,²⁹ the same fair-hearing procedure is followed for all appeals in the state.³⁰ The welfare referees—professional social workers—are appointed by the commissioner of the Department of Public Welfare.³¹ The referees are, in fact, acting as representatives of the commissioner, and their orders are submitted to the commissioner as recommendations that he or she may either accept or reject.³²

The total available population during the study period was 103 petitioners. Of these, ninety-eight are included in the study. The sample consists of hearings scheduled under two separate referees and was restricted to petitioners having welfare hearings in Hennepin County. Given the general urban flavor of Hennepin County, the sample is probably not representative of the total population of petitioners in Minnesota. Hennepin County is also unique in that it is usually represented by an advocate—a professional social worker whose primary responsibility is to defend the county agency's action. In addition, as a metropolitan area, Hennepin County may have more legal assistance available to petitioners than nonmetropolitan areas.

Most data were collected through direct, nonparticipatory observation of welfare hearings using a pretested, structured instrument. The instrument reflected two basic types of data. First, and most prevalent, were categorical data at a nominal level of measurement. Examples of this type of data include petitioner characteristics, public assistance program upon which the appeal was based, petitioner representation, witnesses for both the petitioner and the county, issue raised on appeal, and hearing outcomes. All categories were judged to be exhaustive and mutually exclusive. Second, at the ordinal level of measurement, numerical rating scales were used to assess such elements as the relevancy and effectiveness of the petitioners' cross-examinations, presentation of oral evidence, and the petitioners' oral arguments. No formal reliability studies were conducted. The nature and the scope of the study did not necessitate such an undertaking, and the instrument itself was not being considered for standardized use.

The central variables that this study examines are the following components of procedural due process: retention of counsel (i.e., attorney representation); confrontation and cross-examination of adverse witnesses; presentation of evidence, including witnesses; and presentation of an argument. Given the focus on petitioner utilization, certain elements of procedural process excluded from this study are components such as timely and adequate notice, and the extent to which applicants or recipients are informed of their right to a fair hearing.

Additional variables examined in relation to the utilization of due process procedures are the types of public assistance programs upon which appeals are based and the issues raised on appeal. Each petitioner's appeal stems from the program to which he or she has applied or is currently receiving benefits. Although *Goldberg v. Kelly* involved the termination of benefits, and much of the discussion on welfare appeals has been restricted to this issue, a wide variety of issues may actually be raised on appeal. In Minnesota, the same hearing mechanism and procedures are used for all issues.³³

In addition to procedural due process, the study examines three other elements of welfare fair hearings. First, the length of time that hearings take is examined. If the amount of time required for a hearing can be assumed to be related to the severity of the proposed agency action or the complexity of the issue raised, it will be interesting to note any length of time differences between hearings involving dissatisfaction with benefit level and program exclusion given the greater significance of the latter to the petitioner. Any differences in the length of time for hearings involving fact and legal definitions are also noted. Further, the U.S. Supreme Court has predicted that assistance by counsel in welfare appeals would not "unduly prolong the hearing."³⁴ The findings related to this question will help to assess the accuracy of the Court's prediction.

Second, a Wisconsin study suggests that "a large percentage of no-shows would be strongly suggestive of problems with the hearing procedure, since it would indicate that clients requesting hearings were unwilling or unable to carry their claim through to a hearing or withdrawal."³⁵ For the purposes of this study, a "no-show" is a petitioner who does not appear for the welfare hearing at the time scheduled. This measure includes only those scheduled for a hearing who do not attend the hearing and do not ask for a continuance of the hearing.

Finally, hearing outcomes are examined in relation to procedural safeguards, type of public assistance program, and the petitioner's sex and race. For this study, outcomes are as stated in the referee's order³⁶ and are simply noted as petitioner won, petitioner lost, or petitioner partially won.³⁷ In some instances, appeals are dismissed by the referee. They may be dismissed if petitioners do not attend the hearing and fail to either notify the referee or to send a representative on their behalf.

Theoretically, the hearing outcome should be based on the merits of the case, thereby excluding variables such as retention of counsel and the presentation of an argument. Use of procedural safeguards should facilitate an accurate hearing outcome—not necessarily one favorable to the petitioner. If significant relationships are found between outcomes and due process procedures, the fair hearing mechanism as now constituted may be functioning improperly. For example, if

petitioners represented by counsel have significantly higher success rates than those who are not represented by counsel, it may be appropriate to require the assigning of counsel to petitioners as some have advocated.³⁸ Current research findings indicate that petitioners with attorney representation are at best only slightly more successful in welfare appeals.³⁹

In addition to sampling considerations, two further limitations of this study must be noted. First, only sixty-six hearings were subjected to analysis. This sample size was generally adequate for overall description and for some two-way analyses, but, in a number of instances, the cell sizes were greatly reduced. Although the appropriate statistics were used to account for this reduction, the results must be interpreted very cautiously. Second, although inferential statistics assume a random sample, which this study does not have, inferential statistics were used in the interpretation of the findings but only to provide guidelines for drawing conclusions.

Findings

The central focus in this study was an examination of the extent to which petitioners used available procedural safeguards. The utilization of due process procedures by petitioners is shown in table 1. Previous studies on petitioners' use of due process procedures have been restricted to the retention of counsel by petitioners and confrontation of adverse witnesses. By way of comparison, studies on petitioner use of attorney representation report about 6 percent in the Wisconsin study, 24 percent

Table 1

FREQUENCY DISTRIBUTION FOR THE UTILIZATION OF DUE PROCESS PROCEDURES BY PETITIONERS

Due Process Procedures	N	%
Retention of counsel	27	41
Confrontation of adverse witnesses	62	94
Cross-examination of adverse witnesses	35	54
Presentation of evidence		
Oral evidence by petitioner	58	88
Oral evidence by witnesses	14	21
Written evidence	42	64
Presentation of argument		
Oral argument	32	48
Written argument	10	15

SOURCE—Jan L. Hagen, "Due Process Procedures Utilized by Petitioners in Welfare Fair Hearings" (Ph D. diss., University of Minnesota, 1982)

(for AFDC only) in Cooper's study, and 58 percent in Vulcan's study. Kirchheimer reports that adverse witnesses were present in only 50 percent of the welfare hearings.⁴⁰ A more detailed discussion of the findings for the procedural safeguards follows.

Procedural Safeguards

Retention of counsel—Petitioners were represented by counsel, predominately legal aid attorneys, in 41 percent of the hearings. Non-attorney representatives used by petitioners included paralegals, friends or family members, and social workers. Petitioners representing themselves constituted 39 percent of the sample.

Petitioners who retained counsel were more likely to use the available due process procedures, particularly cross-examination (see table 2), and the presentation of arguments. Petitioners who retained counsel cross-examined adverse witnesses in 81 percent of the appeals, as compared to only 36 percent for those who did not retain counsel. The relationship between the retention of counsel and the presentation of arguments was also statistically significant ($P \leq .001$; $\lambda = .15$). Arguments were presented or submitted for those petitioners with attorneys in 89 percent of the hearings. In only 11 percent of the cases with attorney representation was an argument not presented or submitted. This compares to 54 percent for those without attorney representation.

Although not statistically significant ($P \leq .08$), the findings indicated a tendency toward a relationship between the retention of counsel and the presentation of written evidence. Written evidence was either presented or to be submitted in 78 percent of the hearings with attorney representation as compared to 54 percent of those without attorney representation.

Table 2

RELATIONSHIP BETWEEN RETENTION OF COUNSEL
AND CROSS-EXAMINATION

CROSS-EXAMINATION	COUNSEL		TOTAL (%)
	Retained (%)	Not Retained (%)	
Yes	81 (21)	36 (14)	54 (35)
No	19 (5)	64 (25)	46 (30)
Total	100 (26)	100 (39)	100 (65)

SOURCE.—Jan L. Hagen, "Due Process Procedures Utilized by Petitioners in Welfare Fair Hearings" (Ph D diss., University of Minnesota, 1982)

NOTE.—Numbers in parentheses are number of petitioners.
 $\chi^2 = 10.90$, $P \leq .001$, $\lambda = .37$

Statistical significance was found for the relationship between the type of public assistance program and the retention of counsel ($P \leq .001$; $\lambda = .37$). Petitioners were more likely to retain counsel if their appeals were based on AFDC or Minnesota Supplemental Aid.

A statistically significant relationship was also found between the issues of fact, legal definition, or policy protest and the retention of counsel ($P \leq .001$; $\lambda = .33$). Petitioners raising an issue of legal definition, such as what constitutes school attendance or what expenses are allowable deductions from earned income, were most likely to be represented by counsel. No one raising a protest against policy, such as challenging the procedures established for determining eligibility for assistance with burial expenses or the methods for establishing compliance with GA requirements, was represented by counsel. Slightly more than one-third of those raising an issue of fact, such as the availability of resources or the need for special services such as day care, were represented by counsel.

Confrontation and cross-examination of adverse witnesses.—Although Kirchheimer reports that adverse witnesses were present in only 50 percent of the welfare hearings,⁴¹ in this study adverse witnesses were present in 94 percent of the hearings. Witnesses for the county or the state agency included financial workers, senior financial workers, financial supervisors, work incentive staff, state personnel associated with the medical assistance program, and in one instance a social worker. Adverse witnesses were cross-examined by the petitioners or their representative in 54 percent of the hearings. As already noted, those with attorney representation were more likely to cross-examine adverse witnesses than those without attorney representation, and the relationship between the retention of counsel and cross-examination was statistically significant.

Presentation of evidence.—In 88 percent of the hearings, petitioners presented oral evidence. (Petitioners were cross-examined by the county or state representative in 59 percent of the hearings.) Oral evidence was presented by one or more witnesses for the petitioner in 21 percent of the hearings. Witnesses for the petitioner included a friend or family member, medical personnel, social worker, teachers, and psychologists. The presentation of oral evidence by petitioners or by witnesses for the petitioner was not significantly related to the type of public assistance program; retention of counsel; issues of reduction, supplement, termination, and entry denial; issues of fact, legal definition, and protest of policy; or referee.

Petitioners submitted written evidence in 58 percent of the hearings. In an additional 6 percent, written evidence was to be submitted at a later date. Often, this written evidence was a statement from medical personnel, especially dentists, justifying a requested medical procedure. Although not statistically significant, there was a tendency for the

submission of written evidence to be associated with the retention of counsel.

Argument.—The relationship between the presentation of an argument and the retention of counsel was statistically significant ($P \leq .001$; $\lambda = .15$). Petitioners who retained counsel presented or planned to submit an argument in 89 percent of the hearings, as compared to 46 percent of the hearings for those without attorney representation.

Summary.—Petitioners with as well as those without attorney representation used the procedural safeguards for the presentation of evidence, including witnesses. However, petitioners without attorney representation were not as likely to cross-examine adverse witnesses or to present or submit a closing argument advancing their causes. The findings support the contention that petitioners without legal representation were either unable or unwilling to use the available procedural safeguards of cross-examination and argument which are, perhaps, the most adversarial components of the hearing process. The availability of a legal representative thus enhanced the petitioner's utilization of the procedural safeguards.

The fact that no petitioner in this study protesting an agency policy retained legal assistance supports the contention that petitioners raising a protest against policy may not view the fair hearing as an adversarial model with its focus on contest between opposing parties. Rather, they may view it as a forum for pointing out to state officials the questionable wisdom of a particular policy.

Hearing Time

A series of research questions about the length of hearing time were designed to provide additional important information about welfare hearings. The only previously reported data on this dimension were from Kirchheimer's study. The results in this study on hearing times are very similar to those reported by Kirchheimer, who found that 64 percent of the hearings lasted thirty minutes or less;⁴² in this study, 50 percent were that short.

Hearings ranged in length from six minutes to four hours. The mean hearing time was forty-one minutes, and the most frequent length of time for a hearing was twenty minutes. Although this latter time interval is relatively short, the hearing procedure appeared open and flexible enough to avoid premature foreclosure of the hearing.

Several statistically significant relationships were found between due process procedures and mean hearing time. Hearings for petitioners represented by counsel were almost twice as long as those hearings for petitioners without counsel—fifty-six minutes as compared to thirty-one minutes. This statistically significant difference in the length of hearing time relates directly to the U.S. Supreme Court's prediction that assistance by counsel in welfare appeals would not "unduly prolong

the hearings."⁴³ Although hearings in which petitioners were represented by counsel tended to be twice as long, a hearing of one hour does not seem inappropriate given the complexities of welfare law and of the variety of issues that may be raised on appeal.

Statistical significance was also found for the relationship between cross-examination and the length of hearing time. The average time for hearings in which petitioners or their representatives cross-examined adverse witnesses was fifty-three minutes, as compared to twenty-eight minutes for hearings in which adverse witnesses were not cross-examined. Presentation of evidence by petitioners' witnesses was also statistically related to the length of the hearing, averaging an additional thirty-eight minutes. Although not statistically significant ($P \leq .07$), but expected, the results indicated a tendency for the presentation of an argument to affect the length of a hearing.

The relationship between the length of time for a hearing and challenges to benefit levels (reduction and supplement) and program exclusion (termination and entry denial) was statistically significant ($P < .01$; $\eta^2 = .11$). The mean time for benefit level challenges was twenty-seven minutes; for program exclusion, fifty minutes. The larger amount of time required for hearings on issues of program exclusion may be related to the greater influence of these issues on petitioners' well-being.

No-Shows

Though not of primary concern in this study, data were gathered to determine the proportion of no-shows for welfare fair hearings. The Wisconsin study, using data gathered between 1969 and 1976, found that hearing requests resulting in no-shows ranged from zero to 25 percent, with the percentage of no-shows likely to be higher in urban rather than rural areas.⁴⁴ In this study, approximately one-third of the scheduled hearings resulted in a no-show.⁴⁵

The relationship between the type of public assistance program and hearing attendance was statistically significant ($P \leq .001$; $\lambda = .22$). The distribution of no-shows as a percentage of appeals for each type of program and the comparable percentage for shows are shown in table 3. Slightly more than one-half (53 percent) of the no-shows were appealing decisions based on the Food Stamp and General Assistance programs.

The differential rate of no-shows may be reflective of the greater influence of environmental factors, such as employment, for recipients of certain programs. For example, Food Stamp and GA recipients may be more likely to have their need for public assistance decreased by entry into the labor market. It is also particularly interesting to note that almost one-half of the male petitioners did not attend their hearings, as compared to about one-fifth of the female petitioners. This difference

Table 3

PERCENTAGE DISTRIBUTION OF NO-SHOWS AND SHOWS BY PUBLIC ASSISTANCE PROGRAM

Program	No-Shows	Shows	Total
AFDC	13	87	100 (23)
Food Stamps	75	25	100 (12)
GA	53	47	100 (15)
GA-MC	44	56	100 (9)
MA	19	81	100 (32)
MSA	50	50	100 (4)
Social Services	0	100	100 (3)
Total	(32)	(66)	(98)

SOURCE — Jan L. Hagen, "Due Process Procedures Utilized by Petitioners in Welfare Fair Hearings" (Ph.D. diss., University of Minnesota, 1982)

NOTE — Numbers in parentheses are numbers of petitioners

between the sexes may be reflective of women's greater dependency on the welfare system for economic security.¹⁰

Hearing Outcomes

The distribution of hearing outcomes is shown in table 4. In comparison to most other studies reporting outcomes for welfare appeals, the 19 percent success rate appears somewhat low.⁴⁷ If one assumes that the sample in this study is indeed representative of welfare appeals in general and of welfare appeals in Minnesota, the findings show that the likelihood of winning an appeal has decreased over the years.

Although the reasons for the apparent decrease were not determined, several plausible explanations exist. As issues of legal definition, such as what constitutes a resource or parental support, are resolved through the appeals process, these issues that may have been won in the past are less likely to be raised. In addition, the county or state agency may be making more accurate decisions that are in keeping with agency

Table 4

FREQUENCY DISTRIBUTION FOR HEARING OUTCOMES

Hearing Outcome	N	%
Petitioner won	12	19
Petitioner lost	39	62
Petitioner partially won	1	2
Dismissed	3	5
Other	8	13
Total	63	101

SOURCE — Jan L. Hagen, "Due Process Procedures Utilized by Petitioners in Welfare Fair Hearings" (Ph.D. diss., University of Minnesota, 1982)

policy. This may be particularly true in a larger county agency where particular employees develop expertise within a selected program area.

The only procedural safeguard that was significantly related to hearing outcome was retention of counsel ($P \leq .03$). However, the measure of predictive association was zero. Petitioners with counsel won in 30 percent of the appeals, as compared to 13 percent of those without counsel. Petitioners with counsel lost in 46 percent of the appeals, as compared to 72 percent for those without counsel. It is interesting to note that other outcomes, such as continuances or withdrawals, occurred in 25 percent of the appeals in which petitioners were represented by counsel, as compared to 5 percent for those without counsel. Given that the measure of predictive association was zero, the relationship between hearing outcome and the retention of counsel, while not independent, does not appear to be a particularly noteworthy one in terms of the predictive strength of the relationship.

This particular finding must also be compared to the Wisconsin study that found that petitioners with attorney representation were only slightly more successful, and to Cooper's findings that indicated that, except in situations involving the applications of a legal standard to the particular fact, those with attorney representation were not more successful than those without attorney representation.¹⁸

Although the results must be interpreted cautiously given the low cell frequencies, statistically significant relationships were also found between issues of fact, legal definition, and protest of policy and hearing outcomes ($P \leq .001$, $\lambda = .08$). Petitioners raising issues of legal definition were more likely to win their appeals than those raising issues of fact, 39 and 17 percent, respectively. All petitioners protesting policy lost their appeals.

No statistically significant relationship was found between the type of public assistance program, petitioner sex, petitioner race, cross-examination, presentation of oral or written evidence, presentation of an argument, or type of petitioner representation and hearing outcomes. Unlike Jowell's study, which identified the particular referee as a variable influencing the hearing outcome,¹⁹ this study found no differences in hearing outcomes attributable to the particular referee.

Conclusions and Implications

As required by statutory and constitutional provisions, certain elements of due process procedure are integral parts of welfare fair hearings. The use of these procedural safeguards should facilitate an accurate hearing outcome. Based on this study's results, petitioners who do

retain legal assistance are able to, and in fact do, make use of procedural due process in advancing their causes at welfare fair hearings. As a method to help insure accurate distribution of benefits and for redressing grievances about the administration of public assistance, the fair hearing mechanism is an appropriate vehicle for those who retain legal representatives, both attorneys and trained welfare paralegals. However only about one-half (53 percent) of the petitioners had any legal assistance, predominately from legal aid attorneys. It is, therefore, necessary to focus attention on the fair hearing mechanism as it operates for petitioners without legal representation.

The study results clearly showed that petitioners without counsel were able to use the procedural safeguard of evidence presentation including witnesses. However, the relevance and effectiveness of petitioners' presentation of oral evidence were rated lower for petitioners without legal representation than for those with legal representation. Statistically significant differences were found in the use of cross examination and the presentation of an argument for petitioners with counsel as compared to those without counsel. The measures of association, .37 and .15, respectively, indicate a predictive value of moderate strength. Specifically, those with counsel were more likely to use these procedures in advancing the petitioner's case. In addition, when petitioners representing themselves did use these procedures, they were more likely to be less effective and irrelevant. Therefore, these available procedures do not appear to facilitate fair and accurate hearings for self-represented petitioners.

Given the use of procedural safeguards by self-represented petitioners the fair hearing mechanism does, indeed, have severe limitations for redressing grievances. Previous studies have also reached this conclusion but on the basis of infrequent use of the appeals process.⁵⁰ Here, it is reached on the basis of the actual use of the procedural safeguards by self-represented petitioners.

There are several implications of this conclusion. One implication is that the adversarial model may not be appropriate for handling welfare grievances. An alternative is a nonadversarial model in which an independent, inquisitorial type of tribunal is charged with investigating all aspects of an appeal. This nonadversarial model, however also seems to be inadequate for self-represented individuals. The nonadversarial model is currently used in programs such as the Federal Employee's Compensation Program and the Social Security Administration's Disability Insurance. Research, particularly concerning the latter program, has shown that claimants who have attorney representation in the nonadversary hearing before an administrative law judge not only win their cases in most stages of the hearing process but also are more likely to insist on procedural safeguards than their unrepresented fellows.⁵¹ In addition, Bloch has pointed out that the

administrative law judges frequently fail to develop the record adequately during the nonadversary hearing, and that a large number of cases that are considered by the federal courts are remanded for further consideration.⁵² The nonadversarial model, such as that now used to determine disability claims by the Social Security Administration, does not appear to offer any advantages over the current adversarial model used in welfare hearings.

Another alternative would be to require the assigning of counsel, trained welfare paralegals, or trained advocates to all petitioners.⁵³ This obviously involves a vast commitment of human and financial resources to insure accurate and fair hearings. Private attorneys do perform some *pro bono* work, and, indeed, several petitioners in this study were represented by private attorneys. However, this source of legal assistance for petitioners is the exception. A highly recommended source of legal assistance for petitioners is legal aid—both its attorneys and paralegals. As an invaluable resource for the poor, legal aid services should continue to be available to assist petitioners with their welfare appeals. As a supplement to legal aid services, trained welfare advocates could also be used to help petitioners prepare as well as present their cases.

Many social workers now employed in both public and private agencies serve potential and actual welfare recipients. To operate effectively as advocates for their clients, social workers need to be informed about the appeals mechanism and its procedures. Such familiarity would enhance their ability to protect their clients' interest and to provide appropriate referrals for legal assistance. Establishing linkages with legal aid service as a resource for clients would be particularly beneficial. In addition, social workers would be able to help their clients better prepare to represent themselves in adversarial hearings or to actually function as the client's advocate during the proceedings. Although the intricacies of welfare regulations and welfare law are complex, a clear and thorough presentation of and argument for the client's case, as well as thoughtful questioning of the county or state's basis for action, would certainly enhance the chances of fair and accurate hearing outcomes.

Although the role of social workers in dispensing material goods greatly decreased with the separation of social services from financial assistance in public welfare, social workers are responsible for personal social services such as day care, chore services, and homemaker services. These services may actually be considered in-kind provisions, and, as such, they represent the transfer of income. In providing these services, it is clearly the social worker's responsibility to be informed about the client's rights in these situations and for the worker to carefully follow the procedures required, such as giving adequate notice for any termination and informing the client of the right to appeal a decision.

The major question for future research is whether administrative justice is actually served by welfare fair hearings. In other words, hearings promote the fair application of the agency's rules and practice. One concern worthy of examination is the degree to which hearing outcomes influence ongoing agency procedures and policies. A second concern relates to the accuracy of hearing outcomes. This study focused on the procedures used in welfare fair hearings. An examination of the merits of appeals in relation to hearing outcomes is needed. Third, the high rate of no-shows may imply that the fair hearing mechanism is failing as a grievance procedure for certain petitioners. Further research is clearly indicated to determine why certain petitioners fail to follow through on their appeals.

Notes

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1. George Hoshino and Mary Lynch, "Public Housing: A Case Study in Administrative Justice," *Public Welfare* 33 (Summer 1975): 41-47, quote on 41.

2. George Hoshino, "Title XX: Implications for Administrative Justice," *MSSA Conference* 16 (Fall 1975): 1-2, quote on 1.

3. Kenneth Culp Davis, *Discretionary Justice: A Preliminary Inquiry* (Urbana: University of Illinois Press, 1976), p. 4.

4. Robert M. O'Neil, "Of Justice Delayed and Justice Denied: The Welfare Fair Hearing Cases," *Supreme Court Review* (1970), pp. 162-214. For a similar analysis of O'Neil's article, see Ronald P. Hammett and Joseph M. Hartley, "Procedural Due Process and the Welfare Recipient: A Statistical Study of AFDC Fair Hearings in Wisconsin," *Wisconsin Law Review* (1978), pp. 145-251.

5. See Scott Brink, "Welfare from Below: Recipients' View of the Public Welfare System," in *The Law of the Poor*, ed. Jacobus ten Broek (San Francisco: Chandler Publishing Co., 1966), pp. 46-61; Joel F. Handler, "Justice for the Welfare Recipient: Fair Hearings in AFDC—the Wisconsin Experiment," *Social Service Review* 43 (March 1969): 12-18; Jeffrey L. Jowell, *Law and Bureaucracy: Administrative Discretion and the Limits of Legal Action* (Port Washington, N.Y.: Dunellen Publishing Co., 1975). Comment, "Texas Welfare Appeals: The Hidden Right," *Texas Law Review* 46 (December 1967): 223-53.

6. See Jerry L. Mashaw, "The Management Side of Due Process: Some Theoretical and Litigation Notes on the Assurance of Accuracy, Fairness and Timeliness in the Adjudication of Social Welfare Claims," *Cornell Law Review* 59 (June 1974): 772-82.

7. Marvin E. Frankel, "From Private Rights toward Public Justice," *New York University Law Review* 51 (October 1976): 516-37.

8. Douglas Q. Wickham, "Public Welfare Administration: Quest for a Workable Solution," *Georgetown Law Journal* 58 (October 1969): 46-78, quote on 63.

9. See Joel F. Handler, "Controlling Official Behavior in Welfare Administration," *The Law of the Poor*, ed. Jacobus ten Broek (San Francisco: Chandler Publishing Co., 1966), pp. 155-86, and Leonard S. Rubenstein, "Procedural Due Process and the Limits of the Adversary System," *Harvard Civil Rights-Civil Liberties Law Review* 11 (Winter 1976): 48-96.

10 Mashaw, "Management Side," p 779. See also Hammer and Hartlev, p 178.

11 See Jowell (pp. 60-61) for findings that support Mashaw's contention.

12 See, e.g., 42 U.S.C.A., § 602 (a) (4) (1974), Charles A. Reich, "The New Property," *Yale Law Journal* 73 (April 1964): 733-87, Bernie R. Burrus and Daniel Fessler, "Constitutional Due Process Hearing Requirements in the Administration of Public Assistance: The District of Columbia Experience," *American University Law Review* 16 (March 1967) 199-235, Comment, "Texas Welfare Appeals" (n 5 above); Note, "Social Welfare—an Emerging Doctrine of Statutory Entitlement," *Notre Dame Lawyer* 44 (April 1969) 603-29, Robert E. Scott, "The Regulation and Administration of the Welfare Hearing Process—the Need for Administrative Responsibility," *William and Mary Law Review* 11 (Winter 1969) 291-370, Comment, "Withdrawal of Public Welfare: The Right to a Prior Hearing," *Yale Law Journal* 76 (May 1967) 1234-46, and *Goldberg v Kelly*, 397 U.S. 254 (1970).

13 The Social Security Act of 1935 required a state plan to "provide for granting to any individual, whose claim for old-age assistance is denied, an opportunity for a fair hearing before such state agency . . ." (Title I, § 2 (a) (4)). There were similar provisions for Aid to Dependent Children (Title IV, § 402 (a) (4)) and Aid to the Blind (Title X, § 1002 (a) (4)).

14 For discussion on the vagueness of fair hearing standards, see Beatrice I. Vulcan, "Fair Hearings in the Public Assistance Programs of the New York City Department of Welfare" (Ph.D. diss., Columbia University School of Social Work, 1972), see also Linda W. Ross, "The Fair Hearing as an Adjudicative Mechanism in Welfare Administration: An Analysis of Procedural Policy" (Ph.D. diss., Wayne State University, 1976).

15 See Scott.

16 See Vulcan, Donna Kirchheimer, "Appendix B: Community Evaluation of Fair Hearing Procedures to Public Assistance Recipients," in Daniel J. Baum, *The Welfare Family and Mass Administrative Justice* (New York: Praeger Publishers, 1974), pp 82-105, and Jerry L. Mashaw, "Welfare Reform and Local Administration of Aid to Families with Dependent Children in Virginia," *Virginia Law Review* 57 (June 1971) 818-39.

17 *Goldberg v Kelly*, 397 U.S. 254 (1970).

18 *Id.* at 262-63.

19 *Id.* at 267-71.

20 For a listing of components, see Joel F. Handler, *Protecting the Social Service Client: Legal and Structural Controls on Official Discretion* (New York: Academic Press, 1979), pp 36-40, see also Burrus and Fessler (n 12 above), pp 222-24.

21 The federal statutes require a state agency to "provide for granting an opportunity for a fair hearing before the state agency to any individual whose claim for aid to families with dependent children is denied or is not acted upon with reasonable promptness . . ." (42 U.S.C.A., § 602 (a) (4) (1974)). Similar provisions are made for Medical Assistance (42 U.S.C.A., § 1396a (a) (3) (1974)), Supplemental Security Income (42 U.S.C.A., § 1397bb (d) (1) (A) (1977)), Old Age and Medical Assistance (42 U.S.C.A., § 305 (a) (4) (1974)), and Food Stamps (7 U.S.C.A., § 2019 (3) (8) (1974)).

22 45 C.F.R., § 205.10 (1980) delineates fair hearing requirements for public assistance programs under Titles I (Old Age Assistance and Medical Assistance for the Aged), IV-A (AFDC), X (Aid to the Blind), XIV (Aid to the Disabled), and XVI (Aid to the Aged, Blind, or Disabled and Medical Assistance for the Aged) of the Social Security Act. 45 C.F.R., § 1393.9 (1980) specifically provides for fair hearings for service programs for the aged, blind, or disabled, 45 C.F.R., § 1396.14 (1980) for Title XX, which provides for social services, 7 C.F.R., § 273.15 (1980) outlines fair-hearing requirements for the Food Stamp Program.

23 45 C.F.R., § 205.10 (a) (3) (1980).

24 45 C.F.R., § 205.10 (a) (4) (1980). Exceptions to this regulation include death, probable fraud, hospitalization, and automatic grant adjustment for a class of recipients due to changes in either state or federal law (45 C.F.R. § 205.10 (a) (4) (ii), (iii), and (iv) (1980)).

25 45 C.F.R., § 205.10 (a) (5) (1980). By way of exception, a hearing need not be granted when automatic grant adjustments for classes of recipients are required by state or federal law (*ibid.*). However, see Stephen Alan Owens, "Welfare, Due Process, and 'Brutal Need': The Requirements of a Prior Hearing in State-wide Benefit Reductions,"

Vanderbilt Law Review 34 (January 1981) 173-211. Owens argues that due process requires states to provide fair hearings even when statewide, automatic grant adjustments are made.

26 45 C.F.R. , 205.10 (a) (9) (1980).

27 45 C.F.R. , 205.10 (a) (13) (1980).

28 45 C.F.R. , 205.10 (a) (14) (1980).

29 For example, federal regulations specifying the time period by which a decision must be rendered are different for AFDC and Food Stamps. Federal regulations do not apply to General Assistance.

30 Although the federal regulations are rather extensive, the states still retain some discretion as to the design and use of the fair hearing system within the state. Five states and counties may opt to have local hearings in addition to the required state agency hearings. If evidentiary hearings are held at a local level, the appellant retains the right to appeal to a state agency hearing. Second, once a hearing has been granted, the federal regulations allow the states to choose when in the hearing process benefit will be suspended, reduced, discontinued, or terminated if the appellant raises a question about state or federal law, policy, or a change in state or federal law. The state may immediately suspend, reduce, discontinue, or terminate assistance if the referee determines at the hearing that the only issue raised by the appellant is one of state or federal law, policy, or a change in state or federal law. The alternative mechanism states may utilize is to treat all appeals with a similar procedure, i.e., irrespective of the issue raised, the adverse agency action may not be taken until the referee has given a decision on the appeal. Minnesota is one of the eighteen jurisdictions that does not attempt to determine at the hearing if the sole issue is a question of law or policy. Benefits are continued until all appeals until the commissioner's order is given.

31 Minn. Stat. , 256.045 (1) (1980).

32 Minn. Stat. , 256.045 (5) (1980).

33 For two distinct classification systems, see Hammer and Hartley (n. 4 above), pp. 188-89, and Laura Cooper, "Goldberg's Forgotten Footnote: Is There a Due Process Right to a Hearing Prior to the Termination of Welfare Benefits When the Only Issue Raised Is a Question of Law?" *Minnesota Law Review* 64 (July 1980) 1107-79, at 1178-79.

34 397 U.S. at 270-71.

35 Hammer and Hartley, p. 187.

36 The order states the referee's recommendations to the commissioner of the Department of Public Welfare as to the appropriate action required on the basis of the facts and the referee's conclusions. Although the commissioner of the Department of Public Welfare may refuse to accept the order, such refusals tend to be relatively rare.

37 Orders favorable to the petitioners (i.e., petitioner won) are those that reverse the county or state agency's action, orders unfavorable to the petitioners (i.e., petitioner lost) are those that affirm the agency's action, and orders partially favorable to the petitioners (i.e., petitioner partially won) are those that both affirm an action by the agency and reverse another action by the same agency.

38 See Michael D. Dwyer, "Public Assistance and Constitutional Safeguards: The Case for Due Process," *University of Missouri at Kansas City Law Review* 36 (Summer 1968) 386-401, Frank J. Parker, *The Law and the Poor* (Mary Knoll, N.Y.: Orbis Books, 1973), and Richard A. Montgomery, "Right to Assigned Counsel at Welfare Fair Hearings," *Albany Law Review* 40 (1976) 676-91.

39 Hammer and Hartley, p. 206. However, the Wisconsin study found that when attorney representation and success rates were examined in terms of the issues raised on appeal, those with attorney representation "had significantly higher success rates than self-represented clients when the issue was entry denial, sufficiency, or reduction" (p. 200). Cooper found that clients represented by attorneys were more successful if the issue being appealed involved the application of a legal standard to the facts of a particular case (Cooper, p. 1171).

40 Hammer and Hartley, p. 205, Cooper, p. 1171, Vulcan, p. 272, and Kirchheimer, p. 86.

41 Kirchheimer, p. 86.

42 Ibid., p. 101.

43 397 U.S. at 270-71

44 Hammer and Hartley, p. 199

45 Informal discussions with personnel from the Minnesota Department of Public Welfare involved with welfare appeals indicated that such a high proportion of no-shows was unique to Hennepin County and not reflective of the no-show rate in other Minnesota counties. No Minnesota data were available to confirm this. However, such an assessment is consistent with the Wisconsin study's finding that the no-show rate was higher in urban than in rural areas.

46 For an analysis of the economic jeopardy faced by American women, see Beverly Leopold McDonald and Rita Diehl, "Women and Welfare," *Clearinghouse Review* 14 (February 1981) 1036-41, see also Andra M. Pealdaughter and Vivan Schneider, "Women and Welfare: The Cycle of Female Poverty," *Golden Gate University Law Review* 10 (Summer 1980) 1043-86.

47 The only lower success rate (17 percent) was reported by Vulkan for the years 1963-67. In Jowell's study during 1967-68, 30 percent of the appeals were successful. In the Wisconsin study, the success rate ranged from 23 to 43 percent during 1969 and 1973, in Ross's study for 1970-72, 25-40.6 percent, in Kuchheimer's 1971 study, 27 percent, with an additional 21 percent withdrawn by the agency, and in Cooper's AFDC study, 46.8 percent.

48 Hammer and Hartley, pp. 206-8, Cooper, p. 1170.

49 Jowell, p. 58.

50 See, e.g., Briar (n. 5 above), Handler, "Justice for the Welfare Recipient", Jowell, Ross (n. 14 above); and Vulkan.

51 William D. Popkin, "Effect of Representation in Non-Adversary Proceedings—a Study of Three Disability Programs," *Cornell Law Review* 62 (August 1977) 986-1048, at 1030, 1048.

52 Frank S. Bloch, "Representation and Advocacy at Non-Adversary Hearings: The Need for Non-Adversary Representatives at Social Security Disability Hearings," *Washington University Law Quarterly* 59 (1981) 349-408, at 351-52.

53 The assigning of counsel has been advocated by several legal scholars. See, e.g., Dwyer, Parker, and Montgomery (all in n. 38 above).

Social Distancing of the Neglectful Family

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The sociological concept of social distance has been applied to the neglectful family in order to elucidate its ecology. A scale was adapted from Bogardus's work, using indicators of social distance relevant to encounters in neighborhoods. Three samples of respondents from different ethnic groups in America expressed relative distancing from a hypothetical neglectful family as contrasted with a family representing valued behavior. The indicators proved consistent across subcultures. The study suggests that children are likely to be isolated except in neighborhoods whose standards deviate from those of the general community.

Efforts to explain child neglect have followed three general approaches—economic, personalistic, and ecological. To those pursuing the economic path, poverty is the chief causative factor.¹ From a personalistic standpoint, the primary sources are the parents' character disorders.² The ecological approach highlights the family's relation to its human environment. "It directs our attention to personally impoverished families clustered in socially impoverished places: high risk families and high-risk neighborhoods."³ These approaches are not mutually exclusive, and in many unfortunate households, poverty, character neurosis, and lack of social support are all present, compounding the effects of each other. The present paper, however, is intended to contribute to the ecological understanding of neglect.

How can a family's human environment, the neighborhood, help or undermine its caliber of child caring? Two functions are commonly cited, drawing on processes familiar in group dynamics. First, neighbor

are thought to be a potential mutual-support group. What is meant by "support"? We may distinguish affective from instrumental aid. Affectively, one's neighbors may serve as buffers against loneliness, as confidantes, as sympathizers. Instrumentally, they may be sources of loans, of food, of emergency child care, of transportation, and so forth. For mutual support, it is obviously better that a family be close to its neighbors and embedded in local helping networks.⁴

A second function neighbors may serve in supporting the level of child caring has to do with the social pressure and modeling a reference group can provide. If the neighbors' values about child rearing are those generally accepted in the larger American culture, they may operate to sustain and even heighten those in a vulnerable family. Under these conditions, it is again advantageous for the family to be closely linked with its human environment. But, thus far, formulations from the ecological perspective have paid scant attention to the family's degree of linkage, or closeness with its neighbors. Yet we know from extensive research that this intervening variable must play a crucial role in both the mutual support and reference-group processes.⁵ Practically speaking, one wonders how much neighborhood-improvement programs will accomplish for neglectful families who are not really part of them.

Isolation of Neglectful Families

That abusive families tend to be isolated has been reported repeatedly.⁶ There has been far less research concerning the neglectful. By neglectful we mean "a condition in which a caretaker responsible for the child . . . permits the child to experience avoidable present suffering and/or fails to provide one or more of the ingredients generally deemed essential for developing a person's physical, intellectual and emotional capacities."⁷

It has been found that neglectful households are typically not in touch with agencies that might help, and that black neglectful families, in particular, lack informal contacts normally found in their setting,⁸ that the parents feel their neighbors to be less friendly than do non-neglectful,⁹ and that they are substantially less involved in helping networks.¹⁰ Garbarino and Stocking¹¹ offer evidence that neglectful families live in neighborhoods that are generally nonsupportive.

If neglectful parents tend to be isolated, why are they? Do they withdraw? Previous research on personality traits indicates that this probably occurs in many instances. Are they being shunned? Our impression is that this also frequently happens. If they are rejected

by those among whom they live, why? Is there community disapproval of their life-style, of the poor care they give their children? Such possibility goes against statements that most neglectful families are living in accordance with the standards of their own groups, and the being seen as problematic reflects social workers' middle-class values. Based on previous research,¹² we have not found minimal standards for child care so different in social work from those in clients' communities. This paper, then, reports a test of the proposition that neglectful families are regarded as deviant, and that ordinary people in their communities are inclined to keep their distance from them.

Social Distance

The pioneer urban sociologist, Robert E. Park, advanced the notion of social distance to denote "the grades and degrees of understanding and intimacy which characterize pre-social and social relationships." However, the term is usually associated with Bogardus,¹⁴ who refined it further, developed a scale for measuring attitudes along the intimacy-distance dimension, and did a number of studies related to the concept. Bogardus's early explorations had to do with large-scale phenomena—for example, how typical Americans felt about living on the same street with, working next to, eating with, or marrying into the families of Englishmen, Germans, Italians, Poles, and so forth. In one exploration of stereotyping, Bogardus demonstrated widespread coolness in our country toward "foreigners" from lands that do not really exist!

It is our belief that something like social distancing may also be involved in respect to households regarded as neglectful. This, however, would be social distance at a neighborhood rather than a national level. Accordingly, we designed a scale derived in part from that of Bogardus but modified to make it relevant to face-to-face neighborhood interaction. Also at issue in the present research, therefore, is a methodological question, namely, how well we succeed in quantifying social distance at the neighborhood level.

Method of Data Collection

The design called for presenting a member of the community with a description of a hypothetical family that we had reason to believe would be regarded as neglectful. The person was then asked to respond

Yes or No to a series of items meant to show what degree of intimacy she, herself, would welcome with that family, and how she thought others in her community would feel toward them. To control for the fact that some interviewees may be leery of any unknown family, we also presented a hypothetical "good" (G) family, representing child caring we had reason to believe was highly valued, and asked the same social distance questions. The difference between the two sets of responses was considered an indication of the expressed need to avoid intimacy with the "poor" (P) child care family.

In composing vignettes for the two hypothetical families, we were able to draw on previous research. In constructing a scale for measuring quality of child care in real families, it had become important to determine whether the items used reflected middle-class social work values. The items utilized were converted into a scale for measuring values about child rearing. Then it was shown that a sample of fifty-plus white, working-class mothers from metropolitan Philadelphia would have scored the families studied essentially as we had.¹³ Reviewing data from that study, it was possible to pick out the child care conditions the mothers disapproved most strongly, as well as the conditions or elements of care they valued highest. The case vignette designed to symbolize neglect contains nine items of behavior most disapproved by the Philadelphia mothers; the other vignette weaves together the nine most valued items (see Appendix).

Social distance scales for community and self were administered following each case vignette. In order to obviate the effects of order of presentation, interviewers were instructed to alternate giving the P or G vignette first.

Communities Sampled

Since homemakers usually determine who will or will not be included in the formal helping network of a neighborhood, we interviewed them. For budgetary reasons, we were limited to convenience sampling, but our data are from three rather disparate groups, and so provide an opportunity to test the generality of the phenomena observed. To maximize cooperation, each respondent was offered \$2.00 to participate, and most mothers accepted.

Three University of Georgia graduate social work students were our interviewers. One interviewed twenty-six white women, both middle and working class, residing in Athens, Georgia. Another student administered the instrument to thirty black women, also from Athens. A third student queried thirty mothers of Hispanic origin living in

the upper west side of Manhattan, New York City. The respondent ranged in age from eighteen through the early fifties.

Attitudes toward the Neglectful Family

The hypothesis was that families whose care of children is markedly substandard are likely to be isolated in average neighborhoods. The mothers, it will be recalled, reported what they thought the reaction of their communities would be to the *P* and *G* families on the social distance questions. The results are given in table 1.

On sixteen of the items, a Yes response meant readiness for intimacy. However, on two (questions 6 and 17), Yes implied distancing, so scoring was reversed. Inspection of table 1 shows that in each community sampled, and on every criterion question or social distance indicator the *P* family was reported less acceptable than the *G* family. Response for all eighty-six interviewees are summed in the last two columns. Differences between *P* and *G* were significant beyond .001 on all eighteen indicators, using McNemar's test for nonindependent proportions.¹ According to our respondents, then, the hypothesis was strongly supported. Residents in average neighborhoods are likely to avoid close contact with families whose child care and life-style are disapproved. The avoidance, however, would not be total; three-quarters of the mothers thought their neighbors would say hello to such a mother on the street. But, only a fifth of them thought they would enjoy "spending time" with her, a seventh that they would use her to babysit, and less than a third believed the neighbors' children would be permitted in their homes.

We also asked that the interviewees answer the social distance indicator in terms of their own reactions. Analysis of these responses is given in table 2. As with reports of community attitudes, the differences between *P* and *G* vignettes were substantial and were significant on fifteen of the eighteen indicators by McNemar's test. From comments volunteered, many of the mothers experience the ambivalence so familiar to child protection workers. The parental behavior may be distasteful but "It's not the children's fault." Perhaps as an expression of these mixed feelings, on fourteen of the indicators, significantly more of the mothers described themselves as more willing to accept the *P* family than they said their neighbors were (probabilities were beyond .001 on twelve indicators by McNemar's test). But they did continue to draw lines in certain areas: their own attitudes were the same as their community's on readiness to marry into such a family, letting one's child eat with them, having the mother babysit, and letting one's child play at that home.

Table 1

COMMUNITIES' SOCIAL DISTANCING FROM NEGLECTFUL FAMILIES

SOCIAL DISTANCE INDICATOR ("Our Community Would")	PERCENTAGE INTIMATE RESPONSES								
	White (N = 26)			Black (N = 30)			Hispanic (N = 30)		
	P	G		P	G		P	G	Total (N = 86)
1 Welcome children to our houses	53.8	96.7		66.7	96.2		46.7	93.3	55.8
2 Work next to them	46.2	100.0		56.7	100.0		56.7	96.7	53.5
3 Greet when we meet	69.2	92.3		83.3	100.0		73.3	100.0	75.6
4 Marry their relative	23.1	96.2		23.3	73.3		33.3	86.7	26.7
5 Invite them to join church	53.8	100.0		76.7	90.0		76.7	96.7	69.8
6 Be glad if they moved [no]	11.5	100.0		33.3	93.3		46.7	96.7	31.4
7 Let child eat with them	26.9	100.0		33.3	93.3		16.7	86.7	29.1
8 Chat with them	65.4	100.0		70.0	96.7		80.0	96.7	72.1
9 Babysit their children	42.3	96.2		43.3	93.3		50.0	93.3	45.3
10 Welcome them to community	11.5	100.0		40.0	93.3		46.7	96.7	33.7
11 Ask mother to babysit	3.8	100.0		23.3	90.0		13.3	93.3	14.1
12 Belong to same club	23.1	100.0		40.0	90.0		20.0	93.3	27.9
13 Have child eat with us	65.4	96.2		73.3	96.7		60.0	96.7	66.3
14 Let child play there	38.5	100.0		40.0	93.3		6.7	86.7	27.9
15 Spend time with them	3.8	100.0		36.7	100.0		16.7	100.0	19.8
16 Work at same trade	57.7	96.2		70.0	96.7		46.7	90.0	58.1
17 Speak only when necessary [no]	38.5	92.3		40.0	83.3		23.3	70.0	33.7
18 Offer them help . . .	61.5	88.5		80.0	100.0		83.3	96.7	74.4

Table 2

MOTHERS' OWN SOCIAL DISTANCING FROM NEGLECTFUL FAMILIES

	SOCIAL DISTANCE INDICATOR ("I would...")	PERCENTAGE INTIMATE RESPONSES (Total)		PROBABILITY
		P Vignette	G Vignette	
1	Welcome children to our houses	81.4	96.5	00
2	Work next to them	74.4	98.8	001
3	Greet when we meet	94.2	100.0	N.S.
4	Marry their relative	29.1	82.5	00
5	Invite them to join church	88.4	94.2	05
6	Be glad if they moved [no]	61.6	93.0	00
7	Let child eat with them	17.4	89.5	00
8	Chat with them	91.9	100.0	01
9	Babysit their children	74.4	94.2	00
10	Welcome them to community	69.8	98.6	00
11	Ask mother to babysit	15.1	82.5	00
12	Belong to same club	48.8	88.4	00
13	Have child eat with us	91.9	98.8	N.S.
14	Let child play there	24.4	89.5	00
15	Spend time with them	39.5	93.0	00
16	Work at same trade	68.6	95.3	00
17	Speak only when necessary [no]	62.8	86.0	00
18	Offer them help	97.7	100.0	N.S.

espite the professed willingness to help the disorganized household, net effect is that the parents may be cut off from really intimate acts, and the children as well. The data from self-reports, then, support the hypothesis.

Using the Distance Indicators

In order to study distancing behavior at the neighborhood level, it is necessary for us to modify existing scales, adding to the indicators previously used. Hence, another question occurs: Do the indicators, themselves, "scale"? Do they differ systematically in the intimacy each implies? Some differences seem obvious. Marrying into a person's family implies far greater closeness than being willing to work at the same trade as she does. But, how about finer gradations? It occurred to us that if there were a hypothetical "*P*" family toward whom distancing behavior was typical, then the greater the expressed willingness to engage in a certain interaction with that family, the greater intimacy is implied. For instance, if a respondent expressed willingness to welcome children of the "*P*" family to play at her house, to welcome them to stay in her community, to invite the parents to join her church, the positive responses are indicative of greater intimacy or distancing.

Thus, from table 2 we see that whereas 94 percent of mothers would say hello to a neglectful parent on the street, 39.5 percent would enjoy spending time with her. To invite her to join your church evidently implies less than belonging to the same club with her. Are these findings general, that is, does the difficulty in "passing" on an indicator mean the same in the Hispanic group in New York as it is in the groups in Athens, Georgia? The indicators were put in rank order in terms of the percentages of intimacy-favoring responses in each sample attributed to one's community. The rank-difference correlation (ρ) between the white and black groups from Athens was .86. According to Siegel,¹⁷ for $N = 18$, $P < .01$ when $\rho = .564$, so the degree of correspondence is highly significant. The correlations between the white and Hispanic and the black and Hispanic sample were also strong—.90 and .85. So, there is considerable consistency in response to the *P* family in all three groups, and there is evidence that the indicators represent differing levels of intimacy. "Hello, there" in Spanish implies no more acceptance than it does in Athens, Georgia. The indicators were also rank ordered on the basis of the respondents' reports of how their communities would react to the *P* family. Correlations between pairs of subsamples were, again, substantial. Rho

for the white and black groups was .87, white and Hispanic, .77; and black and Hispanic, .86. Encouraged by these evidences of cross-cultural consistency, we developed a composite scale for social distance at the neighborhood level that might have more general usefulness for the ecology of the families who concern social workers. To this we turn next.

Of the various methods for erecting a composite index to ensure unidimensionality, Guttman's scalogram analysis¹⁸ seemed most appropriate for the present interest. Guttman's technique orders scale items as well as persons. In the present instance, this means that if a mother said Yes to a social distance indicator implying considerable intimacy, she would have said Yes to all indicators making lesser demands. Were there indicators that fit together in this way? Utilizing the data from mothers' reports of their own attitudes, we found five indicators that made up a composite satisfying Guttman's criteria, with a coefficient of reproducibility of 91.6 percent for all eighty-six interviewees. In order of decreasing intimacy, these indicators were: I would (1) let *one of my children eat at their house*; (2) *enjoy spending time with this family*; (3) *be willing to work next to one of the parents*; (4) *welcome the children to play at our house*, (5) *say hello to them if I met them*.

Responses to the five items of the combined sample of eighty-six respondents reflect a Guttman social distance scale. Respondents who "passed" all five items were assigned a scale score of five, reflecting greatest intimacy, or minimal social distancing. Only twelve respondents affirmed all five indicators. Other respondents were assigned lower scale scores, based on the number of items "passed." Only one mother was at the zero point, having responded negatively to all five indicators.

The most discriminating indicator was "let one of my children eat at their house"; only fifteen mothers affirmed this item. The least discriminating scale item was "say hello to them if I met them"; only five of the eighty-six respondents responded negatively to this indicator.

The women interviewed represent varying social backgrounds. Although our samples were relatively small, we wondered whether there might be differences among them with regard to willingness to permit closeness with the neglectful family. Using the composite index derived by Guttman's method, they were divided into respondents who were relatively close (i.e., said Yes to four or more items) versus those who were more distant (Yes to three or fewer). Results for the three samples are given in table 3.

While there is some variation among samples, the proportions in each resemble those for all three taken together. Indeed, the χ^2 test (2 df) yielded a probability of no difference of 43 percent; the mothers willing to accept the *P* family proved homogeneous in all three samples.

Table 3

CULTURAL DIFFERENCES IN DISTANCING FROM THE NEGLECTFUL FAMILY

LEVEL OF ACCEPTANCE	PERCENTAGE OF RESPONDENTS			Total
	White	Black	Hispanic	
Close	26.9	43.3	33.3	34.9
Distant	73.1	56.7	66.7	65.1

Once again, the phenomena under consideration proved reasonably consistent.

We also utilized factor analysis to see if there were natural dimensions among the indicators. We found one major factor, accounting for 49 percent of the variance, one of fair significance accounting for 17 percent, and one minor factor that seemed noteworthy (11 percent). The items grouped empirically, and the labels we have given them were:

Factor 1 *Trust*

- Let one of my children eat at that house
- Let my children play at that house
- Ask the mother to babysit for me.
- Enjoy spending time with this family.

Factor 2. *Willingness to interact*

- Be willing to work next to one of the parents
- Belong to the same club as the parents
- Work at the same trade as one of the parents.
- Speak to these parents only when necessary

Factor 3 *Concern for their children.*

- Welcome their children to play at my house.
- Be willing to babysit their children.
- Have one of their children over for a meal

We find it interesting that these factors, empirically derived, repeat some of the themes already mentioned. There is the issue of willingness to maintain social continuity at work or socializing, and expression of concern for others' children. But the factor of greatest weight in signifying distance or closeness involves indicators that concern entrusting one's children to the care of a neighbor.

Conclusion

In this study we have resurrected the sociological concept of social distance to throw light on the ecology of the neglectful family. It was

hypothesized that the neglectful family might well be isolated, or "distanced," by others in the community on the grounds of the unacceptability of its care of its children and general life-style. Building on previous contributions by Bogardus, a scale for social distance was constructed made up of indicators that seemed relevant to interactions on the neighborhood level. Three samples of respondents expressed relative distancing of a hypothetical family typifying neglect, as contrasted with one that represented valued behavior. Therefore, the hypothesis was strongly supported. Neglectful families are apt to reside in, but not be involved with, their communities.

It was also shown that the indicators, themselves, fall into a hierarchy of closeness, such that greeting signifies very little, while entrusting one's children for babysitting, or marrying into one's family, imply great intimacy. The rankings of the social distance indicators used were found to be surprisingly consistent in the three samples studied.

The results of this study suggest the addition of an important intervening variable to the formulations about vulnerable families from the ecological perspective, that is, their degree of embeddedness or social distance from their neighborhoods. Parents who neglect their children are likely to be isolated by others in neighborhoods with expectable norms about child-rearing. But they may not be isolated by those whose norms are, like theirs, dysfunctional and deviant from the larger culture's.

Appendix

Interview Guide to Social Distance Scale

The picture we are going to give you is of an imaginary family. It is not any particular, real family we actually know. But, you may know of one that seems to you very much like this one. If you don't know a family just like this, try to pretend this is a family you have seen on TV or at the movies. We will now give you some facts about the family, and how their children live. Then, we are going to ask you your opinion about how people in your community would probably feel about dealing with this family.

[Family P]

This family consists of a mother, a father and four children. The youngest is six months old, and the oldest is ten years old. Here is how they live. They live in a rundown house where the paint is gone and the screens are torn out. The windows have been cracked and

oken for over a month and nobody fixes them. When it rains, the of leaks water into the house. There is little furniture, so that one the children has to sleep in the same bed with the parents. Smelly pots and pans and dirty dishes are all over the place—in the bedroom just as likely as in the kitchen. The parents often go off for hours leaving only the ten year old child to watch over the other three. Then, when one of the children tries to tell his mother something, she pays it no attention. As a matter of fact, when one of them comes to her looking for a little loving, she is just as likely to push him aside and go on with whatever she is doing.

[For Community Attitudes]

Now, we want to ask you how you think *people in your community* would feel about the parents in a family they think is like this one. If you don't know for sure what most people would do, just give us your best guess, or judgment, of how they would feel. Just remember the family described, all right?

[Social Distance Scale]

They would:	Yes	No
welcome the children to play at their house?
be willing to work next to one of the parents?		
say hello to them if they met them?		
worry one of their relatives?		
invite the parents to join their church?		
be glad if they moved away from here?		
let one of their children eat at that house?		
talk with a parent when they met them?		
be willing to babysit their children?		
welcome them to stay in your community?		
ask the mother to babysit for them?		
belong to the same club with the parents?		
invite one of their children over for a meal?		
let their children play at that house?		
enjoy spending time with this family?		
work at the same trade as one of the parents?		
speak to these parents only when necessary?		
offer help to the family, if needed?		

[For Own Attitudes]

As asked what you think the general feeling toward these folks would be around here. Now, we'd like to ask you. How do you think you, yourself, would react to the same folks? Do you want me to read the family's story again, to remind you of the picture? [Do so, if needed] Then, let's go through the same questions, and you tell me how you, yourself, would probably feel.

[Social Distance Scale]

You would:
 welcome the children to play at your house? etc.
 the vignette for Family G (Good) read as follows:
 In this family, the mother lets the children know she is scared for

them when they get in danger. She is strict about little ones run into the road. Poisonous sprays for the garden and cleaning fluid put away where children can't reach them. The parents are car too, about where they store medicine. These children would n put the flaking paint in their mouths, since it might cause lead poison

When you meet one of these children, his head and hair are al clean. Their mother trains them to wash their hands after using toilet. They are taught to be polite and respectful toward adults, to keep their hands off other people's property. The parents tr arrange for them to learn how to swim, while they are still youn

Notes

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Purchase of Service in England

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Purchase of service contracting (POSC) is a characteristic feature of service delivery systems in the American social services. It is also a continuing feature of the post-Seebohm provision of personal social services in England. This common experience prompts questions about why government agencies choose to purchase services rather than provide them directly. The purpose of this article is to examine the rationale for POSC from the British perspective.

Seebohm and Title XX were key words that symbolized the transformation of the personal social services in England and the United States, respectively, during the 1970s. The changes that took place in the United States, however, are often unfavorably contrasted with the post-Seebohm provision in England. The phenomenon about which most concern has been expressed in the United States is the dramatic expansion of purchase of service contracting (POSC).¹ What is often forgotten, however, is that POSC remains an important feature in the landscape of the English personal social services as well. One of the reasons for this oversight is that few scholars, with the exception of visiting Americans such as Mencher² in the 1950s and Kramer³ in the 1970s, have concerned themselves with this topic. In fact, despite the many cultural differences between the two countries, the English experience of purchase of service closely parallels that of America in many respects.⁴ Our aim is not to compare the overall operation of POSC on either side of the Atlantic, but to take a single particularly interesting aspect of the common experience of POSC—the rationale

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for the purchase of social care—and examine it in a specifically English context.

First, we present a brief review of the salient U.S. literature. Second, we discuss the subjective perceptions of managers in English Social Services Departments (SSDs) about the reasons for purchasing services rather than providing them directly. Finally, attempts are made to test various hypotheses that might account for the substantial variations in the purchasing behavior of SSDs. In particular, we will report the results of a statistical investigation of POSC spending in England in 1978–79. Before proceeding, though, there are three points about POSC in England worth emphasizing: those aspects with which we are particularly concerned, the relative imprecision of the term, and its scale.

Fiscal transfers associated with SSDs vary along three critical dimensions. First, the type of agency with which the relationship is established can be another local authority, a voluntary organization, a profit-making agency, or an individual. Second, the resources involved can be both capital and current expenditure, or transfers in-kind such as accommodation. Finally, the transfers can flow in both directions, the SSD is a provider and recipient. For the purposes of this article, however, the use of the term POSC will be restricted to refer to financial transfers by SSDs on current account, and, although this includes purchases from other local authorities, we shall concentrate primarily on fiscal relations between SSDs and nonstatutory agencies. This represented about 71 percent of all POSC spending in 1978–79.⁵

Even within this restricted context, it is essential to emphasize that POSC is not a very precise concept on either side of the Atlantic. In the United States, Wedel has put forward the clearest definition. "A contract may be defined in general terms as an agreement between a governmental agency (the contracting agency) and another organization or individual (the contractor) for the purpose of providing care or services to clientele of the governmental agency."⁶ But there is an important qualification to this definition because the financial relations between public and private agencies are best considered as a continuum where clearly expressed contracts are at one pole and unrestricted grants not unlike gifts are at the other. As Beck pointed out, "It is difficult . . . to limit discussion of government by contract to instances where there is an actual contract, since the key issue seems to be the expectations of the public body, whether embodied in a statement of a grant or in a statute or a letter of understanding or an actual contract. Yet in some instances of public support for private agencies the expectations of government are so vaguely formulated that there is little similarity to contract."⁷

Moreover, as the most recent studies have shown, POSC is best seen as an umbrella term embracing different modes of partnership between

public and private agencies. For example, Gurin et al.⁸ distinguish between purchase of service and block contracting, whereas Pacific Consultants⁹ identify forms of contracting with other public agencies, private organizations, individual vendors, and via-client reimbursement.

The situation in England is very similar, and at least four types of POSC can be identified. The most common is vendor reimbursement for units of client-specific services, such as a place in a residential home or foster care. Quasi contracting usually involves the payment of substantial grants to voluntary agencies on the assumption that services will be provided that substitute for SSD provision but where the expectations of both sides are rather vague. In certain instances, clearer contractual obligations do exist when SSDs reimburse delegate agencies that provide services on their behalf. Finally, almost all SSDs distribute a large number of small grants to numerous organizations in support of general community development.

The final point worth making about POSC in England is that although the relative level of expenditure is smaller than in the United States, as shown in table 1, it can be substantial. Of course, there are wide variations among individual local authorities, but some SSDs make very extensive use of voluntary organizations, and it is not unusual to find such authorities contracting-out all of their expenditure on certain services such as residential accommodation for the mentally and physically handicapped, meals on wheels, day nurseries, and day centers for the elderly.

The American Context

The decisions made by public agencies in the United States about whether to provide social services directly or purchase them from private organizations have been among the most controversial and

Table 1

POSC AND THE PERSONAL SOCIAL SERVICES IN BRITAIN AND THE UNITED STATES

COUNTRY	PURCHASES FROM PRIVATE AND VOLUNTARY AGENCIES AS A PROPORTION OF TOTAL EXPENDITURE			Coefficient of Variation (%)
	Minimum (%)	Mean (%)	Maximum (%)	
Britain, 1978-79	8	8.2	20.9	50.7
United States, 1978	1	34.2	68.2	41.2

SOURCES—Department of the Environment, *Revenue Outturn Statistics Forms ROJA-E* (London, 1980), American Public Welfare Association, *A Study of Purchase of Social Services in Selected States* (Washington, D.C.: APWA), appendix B.

hotly debated in the field of social care during the 1970s. As Sharkansky wrote, "Contracting does not proceed quietly. It has warm supporters and intense opponents. There are stories of beautiful successes and horrible failures, each mingled with simple ideology, myth, and personal stakes."¹⁰

Despite the considerable interest in and importance attached to POSC, however, there is a remarkable absence of firm evidence with which to evaluate the various arguments advanced for and against contracting out. One of the consequences of the paucity of good evaluative material is that there has been little other than faith and prejudice to guide policymakers in their POSC decision making. Benton states that "since . . . state and local decisions are nearly always based on intuition rather than formal judgement, it is not surprising that there is tremendous variation among jurisdictions across the United States in the actual pattern of purchased versus direct service delivery. . . . In many jurisdictions, no rationale other than tradition and the accumulated legacy of past decisions can explain the relationship between direct and purchased services."¹¹ Despite this there is no shortage of normative arguments in favor of POSC. Most of them fall into four distinct categories: it is more economic, it offers greater flexibility and consumer choice, it provides more scope for innovation and specialization, and it improves management and evaluation. The economic arguments for POSC are probably the most common, and the starting point is the set of widespread beliefs about the inefficiency of the public sector. For example, Savas writes that "government is very inefficient in delivering services, due to a host of factors, including absence of management skills, lack of motivation, political interference, patronage, rigid civil service system, public employee unionism . . . lack of agreement on goals of government programs, the difficulty of measuring performance (particularly in many of the 'softer' services), and the monopoly structure . . . of many public services."¹²

In contrast, Fitch¹³ and Fisk et al.¹⁴ suggest that the adoption of POSC introduces the advantage of competition among suppliers which may produce, via economies of scale and specialization, lower unit costs and improvements in the quantity or quality of services. Terrell supports this view by quoting the views of public officials who described the various economic advantages to government "in terms of the 'multiplier effect' secured when private agencies increase the efficiency of public dollars through the use of 'volunteer support, mixed funding and donated capital.'"¹⁵

Another frequently cited advantage of POSC is that it permits greater flexibility and choice in planning and delivering social services, and it offers an "escape from the rigidities of personnel, budgetary, and other central controls imposed by general government agencies."¹⁶ A more

positive argument is that purchasing and contracting offer clients more choice and better access to services from a wider range of providers. If public agencies provide incentives for many suppliers to enter the market, including community groups with limited independent resources, it is possible it might "improve the access of some clients to needed services, since they would present themselves to providers who were very close to them both physically and in other ways."¹⁷ Similarly, Terrell¹⁸ and Kramer claim that POSC "can be an effective way of serving hard-to-reach or controversial groups, cultural minorities or widely-dispersed populations whom government may be obligated to serve, but where fear or stigma prevent utilization."¹⁹ It also offers a way of obtaining specialist skills that are only needed infrequently,²⁰ and Terrell reports that "the decision to buy services also grew from the belief that the private sectors could provide better innovative programs."²¹ Finally, a number of commentators have suggested that POSC will improve the management and evaluation of social programs. Fisk et al.²² suggest it will provide improved management information, such as comparative data on the effectiveness and efficiency of different suppliers. Manser believes that it will encourage "agencies participating in purchase of service contracts to develop more sophisticated and objective costing procedures and to create refined standards of quantity and quality of services."²³ Kramer thinks that POSC offers government agencies the opportunity to influence standards in, and coordinate the activities of, various contractors.²⁴ Last, Fitch points out that it promotes the development of desirable management devices, such as incentive reimbursement schemes.²⁵

Whatever the merits of the normative arguments, the limited empirical evidence available about the criteria that influence POSC decision making supports the general view that "there are no consistent policies governing purchase of services."²⁶ This is confirmed by both Wedel and research teams from the Urban Institute, Pacific Consultants, and the American Public Welfare Association (APWA), who conducted surveys of key local actors to obtain information about the factors that influenced their decisions about POSC.

Wedel's data were collected by sending a mail questionnaire to the chief executives of state public assistance agencies in 1972-73. The questionnaire included twenty-three statements encompassing arguments justifying the use of POSC as well as some of the problems. Respondents were asked to rate the influence of each statement about POSC decision making on a six-point scale. The results were rather disappointing. The statements that were suggestive of an improvement in managerial efficiency, such as greater cost effectiveness, flexibility, and specialization due to POSC, were not considered to be very influential. On the other hand, they lend little support to the view that

POSC has deleterious consequences. In fact, Wedel concludes that his results "will come as little surprise to those who hold that the purchase of service policy has been interpreted in an opportunistic fashion,"²⁷ and "that the potential hazards and benefits identified in the literature play a secondary role in decisions concerning the practice."²⁸

The Urban Institute survey was conducted in 1977 as part of their general evaluation of the implementation of Title XX, and questions were addressed to private suppliers as well as public agencies requiring services. Once again, however, the picture obtained was a mixed one. The two most common reasons given for deciding to purchase service were the lack of qualified public employees and tradition, although lower costs were also important to a smaller number of respondents.²⁹

The third study was carried out in six states in 1978. Pacific Consultants asked state managers to rank seventeen factors about POSC decision making in order of importance. The results show that three factors were consistently identified as very influential. First, increases in demand were greatest for the "hard" services historically provided by private agencies, and this inevitably increased POSC. Second, the availability of nonprofit agencies with the resources to provide the 25 percent match for federal funds in the early years of Title XX meant that they were easily assured of obtaining renewable contracts. Finally, once providers were locked into the system they had a vested interest in applying political pressure to maintain their position. In contrast, it was reported that information about comparative costs had not been a significant factor in choosing POSC because of the absence of reliable data.³⁰

The final survey was carried out by the APWA in five states during the winter of 1980–81. The purpose of the study was to identify and analyze factors influencing POSC. The main research instrument was a structured questionnaire that asked respondents to rate the importance of twenty-five factors in terms of their influence on decisions to purchase social services. A rather odd aspect of this procedure was that two potentially important factors were deliberately excluded: "One of them was political influence . . . while the other was tradition or historical precedent . . . The respondents could have brought up these factors as having high influence upon the purchase decision of any of the study services. . . . As it turned out, however, only a few respondents identified these factors as having anything to do with purchase decision."³¹

The validity of this procedure is certainly open to question. Nevertheless, the finding that "no factor/cluster area emerged as a consistently high influence factor across all service categories and all states"³² is consistent with the earlier studies. Bearing these findings in mind, we now turn to a discussion of POSC in England so as to investigate to what extent the American experience is duplicated across the Atlantic

Subjective Reasons for POSC in England

During 1980 members of the Personal Social Services Research Unit (PSSRU),³³ to which the authors belong, interviewed a sample of directors of SSDs in England about their perceptions of the fiscal pressure facing their authorities.³⁴ One of the topics discussed with them was purchase of service in general and collaboration with the voluntary sector in particular. Subsequently, we went back to three of these authorities (a rural nonmetropolitan county, a large metropolitan district with a very deprived inner-city area, and a suburban London borough) and interviewed many of the people within the SSD most closely involved with POSC.³⁵ One of the most important questions we put to SSD managers and directors was why they chose to purchase services rather than to provide them directly. As we expected, the answers varied considerably, but the most common reasons given for POSC were as follows: their traditional availability; they provide specialized but essential services; their costs are lower, and they provide better value for money; they are more flexible, innovative, and participative, and they promote consumer choice and better access to services. We shall elaborate upon each of these reasons separately, but it should be recognized that in practice they are neither exhaustive nor mutually exclusive.

Traditional Supply

The most common reason given for POSC by representatives of local authorities is tradition. In general, this means that because of the traditional availability of different kinds of services, many SSDs have developed their own provision around that supplied by voluntary organizations. Also, in some areas, religious affiliation and the development of denominational services helped to establish a powerful sense of civic pluralism. For example, in two of the authorities we visited there was no doubt about the historical importance of a strong Roman Catholic presence.

The importance of the availability of voluntary provision, especially residential places, was emphasized on numerous occasions in both a positive and a negative sense. One assistant director stated that "if a voluntary organisation exists and it's providing a satisfactory service then we support them . . . there are voluntary homes up and down the country providing perfectly adequate accommodation at a cost that is relatively cheap. Why should the local authority go around creating places and building places when that facility exists?"

In contrast, the director of another authority explained that the lack of alternative provision accounted for the local public response: ". . . if you are elderly and you have to go into a residential home you would like to be sufficiently near to your relatives so that you can be visited,

and since there are no private homes here of any kind whatsoever then the logic of the situation is that the local authority will provide homes within this area . . . in certain parts of the country there are voluntary homes . . . but in our instance the short answer as to why we provide homes ourselves is that there are no voluntary homes in existence."

Specialized Services

Nearly all SSDs have at least some clients with special needs in circumstances that make it uneconomic for the local authority to provide a suitable service themselves. One senior manager told us that his SSD used the voluntary sector "basically to fill in gaps, not to duplicate what is available but to go outside when there is a special need really." This is particularly common with respect to residential provision for certain groups of children and the mentally and physically handicapped. One social work manager explained why voluntary services had been purchased for a particular client in his area. A teenage girl who had been in foster care had "graduated to a bedsitter and just wasn't coping and obviously needed something between the foster home and the bedsitter, somewhere where there was some supervision but some ability to have freedom as well. We had no hostel provision locally but the Children's Society have a House which is set up for this type of child where there is quite a lot of supervision and support available, but it's not enforced as it were, the children have bedsitter type accommodation and it seemed ideal for this particular lass."

At different times and in other parts of the country various other considerations apply. Often, for example, delegate agencies are sponsored because of the special nature of their provision, which is reinforced by a historical involvement in meeting the needs of a particular client group. The assistant director of a small northern SSD explained that his authority delegated responsibilities to the local Deaf Society because it was a well-established organization with considerable expertise.

Lower Costs and Better Value

There is almost no evidence to support the view that sectoral cost comparisons play a significant part in POSC decision making. One of the reasons why costs are not of central importance is that, as in the United States, there are relatively few directly comparable services provided in the public and voluntary sectors. Either the nature and quality of service provision and/or the characteristics of clients varies between the two sectors. For example, it is widely recognized that levels of client dependency and associated staff costs are much lower in voluntary than in local authority homes for the elderly.³⁶

It is true that the observable unit costs of nearly all residential provision in the voluntary sector are lower than SSD provision, but

the existing discussion of these cost variations is rather simplistic.¹⁷ In fact, it is safest to assume that lower unit costs in the voluntary sector are attributable to such factors as the traditional treatment of capital costs and poorer conditions of service for staff. Neither of these factors are constant, and with average costs rising fast in the voluntary sector, it is probable that, standardizing for client characteristics, the long-run marginal costs of residential provision are very similar in both sectors. The same conclusion might be widely applicable to many other, professional services. For example, one influential director was adamant that in his experience "the professional voluntary organizations are able to do the job no more cheaply or effectively than the local authority and to have a voluntary organization doing part of our work only adds to the problems of communication and co-ordination. For example, a national child care organisation wished to start a family center, but the cost to us would have been greater than the cost of our own very effective center. If money had been available it would therefore have been preferable for us to open our own family center rather than ask a voluntary organization to do so."

As far as residential provision is concerned, which dominates POSC, the results of our interviews suggest that positive placement decisions are very rarely made on the basis of cost comparisons. If residential care is thought to be appropriate, then the assessed needs and/or preferences of the client are generally paramount. Insofar as costs enter into the decision-making process at all, our impression is that they have an increasingly negative influence. For example, the impact of fiscal pressure in many local authorities means that SSDs are adopting more constraints and stricter criteria about the sponsorship of elderly people in voluntary and private homes because this is a relatively easy part of their budget to control.

Although it is very common for claims to be made that voluntary services are cheaper than their statutory equivalents, there is a lack of evidence to support such propositions. In fact, one of the few careful evaluations to have been undertaken produced rather mixed results. Two of our colleagues have demonstrated that although voluntary day centers for the elderly can be cheaper, *ceteris paribus*, than local authority provision, this is crucially dependent upon the scale of operation. "Small voluntary units certainly enjoy a cost advantage, but larger voluntary units are unlikely to be cheaper, and are probably more expensive, than local authority units of a similar scale."¹⁸

Nevertheless, a more plausible variant to the theme that voluntary provision is cheaper than public is the argument that voluntary organizations provide better value for money. They do so for two main reasons. First, as in the United States, voluntary organizations subsidize the services that they provide on behalf of SSDs. For example, Mencher reports that in 1954 the Home Office specifically suggested to local

authorities that they should seek a 25 percent subsidy for each person placed in a voluntary home.⁹⁹ Similar practices continue to the present day. Second, contracting-out to voluntary organizations often occurs in the provision of supplementary assistance aside from the basic services. In his study of Birmingham, for example, Newton cites the following observation by a local government officer: "If we find an organization that does our job more cheaply then we support them. We might give a grant of, say, £1,000, but we get £5,000 worth of work out of them." This proposition is well supported by evidence from different parts of the country and is particularly applicable to informal but intensive preventive services.

Flexibility, Innovation, and Participation

Some of the many advantages often claimed for voluntary agencies are that they are more flexible, innovative, and participatory than SSDs. These views were supported by a number of local authority representatives, but they emphasized that they were rarely the primary reasons for POSC. It is true that voluntary organizations can often be more flexible than SSDs can choose or afford to be. For example, in some areas a local authority might decide to support a voluntary center for the elderly in a temporarily converted church hall. This service might be regarded as far from ideal, but it is easier to support for something that might not otherwise exist in any form if the SSD is not directly responsible for service provision. Voluntary agencies can also be used to enable the local authority to escape constraints, such as restrictive practices. Collaboration with the voluntary sector can also generate more positive advantages. One director told us about the way in which the meals on wheels service has been extended. "Because we have the meals delivered by a voluntary organization we can combine it with the books on wheels service. If it was a local authority service it would be very unlikely that you could generate something like books on wheels because economically it would be lost before it started but, because it's the voluntary sector, instead of taking ten meals you might take eight meals and four hours of books. . . . There is lots of flexibility you can get through using the voluntary sector."

There is little evidence to support the proposition that voluntary organizations are necessarily more innovative than SSDs, but they are often useful vehicles for experimental action. One local official commented that "there are times when a voluntary agency can do things creatively and innovatively in a way that a local authority might find a little more difficulty with . . . especially when the finance is made available through something like Urban Aid and the authority wishes to avoid being locked into long-term service delivery."

Finally, the participatory advantages of POSC are widely recognized. A community liaison officer identified two of them: "If you are

voluntary organizations then it involves members of the community becoming involved in their own social services and I think that's to be welcomed because that has spin-offs in the community. Secondly, a number of these projects involve a degree of self-help amongst client groups, that too I think is to be commended."

Consumer Choice and Access

The last reason given to explain POSC that was mentioned with any frequency by local authority representatives is that it enables some clients to have a degree of choice about, and improved access to, the appropriate social services that they want or are thought to need. Indeed, part of the basic philosophy in some authorities is the belief that alternatives to SSD provision are essential ingredients in a pluralist welfare system. Another common argument is that there are always groups of clients that the SSD finds hard to reach for one reason or another, and so certain kinds of voluntary agency can be more effective service providers for, say, battered wives, alcoholics, and West Indian youths. A reassuring feature of such agencies is that "they do not carry the social services label or a professional label. . . . I think, for example, that there are certain clients who would go to Marriage Guidance Counsellors precisely because they are a non-statutory body, they wouldn't be seen dead inside an SSD office Another example is the Samaritans, I mean someone who is suicidal is not going to ring up their Social Services Department."

Overview

It is not our intention to suggest that the reasons for POSC as stated above represent an exhaustive list, but they do give an indication of the considerable variety of local authority opinion about purchasing services rather than providing them directly. In particular, the cumulative effect of the evidence we accumulated from various local authorities largely confirms the picture presented in the American literature: no consistent and unambiguous rationale for POSC emerges. In the circumstances, therefore, it is worth investigating whether any statistical relationships, which have a degree of causal plausibility, can be identified so as to improve our understanding of the observed variations in POSC between SSDs.

Variations among SSDs in England

One of the characteristic features of POSC in England is the considerable variation in purchasing behavior among SSDs. The purpose of this section, therefore, is to present a preliminary statistical investigation

of the underlying reasons that account for the observed patterns of spending in the English personal social services. The analysis is necessarily speculative at this stage, although it is hoped that a current investigation of the characteristics of volunteers will provide "training data to enable us to specify improved models, with the help of synthetic estimation,"⁴¹ in the future. In the meantime, we hope to improve the limited understanding of POSC by examining various hypotheses that purport to account for the purchasing of services in England.

The financial statistics relating to POSC are complex and not entirely satisfactory for our present purpose. The revenue outturn statistic collected by the Department of the Environment provides information about spending by SSDs on purchases from, and grants to, private and voluntary agencies for about forty different categories of service.⁴² Unfortunately, SSDs are not consistent with each other in the distinction they make between purchases and grants, and so more reliable results can be obtained by aggregating the two categories into an overall measure of POSC. Our purpose is to examine variations among areas in spending on this overall measure of POSC for different services. We standardize levels of expenditure by taking as the dependent variable levels of spending per head of the population. Moreover, as we do not have space to report explanatory models for all of the personal social services, we have concentrated attention on the selection shown in table 2. The extent of variations among SSDs for this subset of services is illustrated in table 3.

Hypotheses

Our primary intention is to report the results of our attempts to test the strength of causal arguments derived from the relevant literature and interviews that we discussed earlier. First, we will outline the primary arguments and show how they can be operationalized.

Labour ideology.—It is widely assumed that Labour-controlled local authorities are less enthusiastic about POSC than their Conservative counterparts. "This is largely a by-product of the fact that the Labour Party seems to have 'more faith in the merits of municipal enterprise.'" "Labour," therefore, represents the proportion of council seats held by the Labour Party in each local authority in 1978. We expect to find a negative relationship between this and most of the dependent variables.

Economies of scale.—One of the most common arguments advanced to account for POSC is the need for public agencies to purchase specialized services. The capacity to provide these services is directly related to the scale of a public agency's service delivery system. It follows therefore, that the smallest authorities with the fewest resources might have the greatest difficulty in providing a full range of services. Davies et al. state: "There is much empirical evidence that large authorities enjoy potential advantages in the provision of services. . . . Much of

Table 2

POSC AND THE PERSONAL SOCIAL SERVICES IN ENGLAND, 1978-79

Services	Total Expenditure* (£ Thousands)	Purchases from and Grants to Private and Voluntary Agencies (£ Thousands)	POSC as a Percentage of Service Expenditure (%)
Homes for the elderly	317,559	21,355	6.7
Residential care for children	206,143	33,064	16.0
Other residential care	77,657	26,607	34.3
Meals on wheels	17,956	1,829	10.2
Day care for the under fives	43,379	2,634	6.1
Day centers for the elderly	19,017	2,013	10.6
Subtotal	681,711	87,502	12.8
All other services†	608,910	18,955	3.1
Total	1,290,621	106,457	8.2

SOURCE.—Department of the Environment, *Revenue Outturn Statistics Forms RO3A-E* (London, 1980)

* Staff and running expenses.

† Including social work, administration, and domestic help

Table 3

POSC VARIATIONS BETWEEN SSDs IN THE PERSONAL SOCIAL SERVICES IN ENGLAND, 1978-79

Service	Maximum (%)	Mean (%)	Minimum (%)	Coefficient of Variation (%)
Homes for the elderly	39.8	7.4	0	99.3
Residential care for children	52.4	16.7	0	65.7
Other residential care	92.7	33.8	0	49.9
Meals on wheels	100.0	18.1	0	166.5
Day care for the under fives	100.0	10.7	0	215.7
Day centers for the elderly	100.0	15.7	0	175.1
Subtotal	33.3	13.0	1.5	49.2
All other services	13.5	2.9	0	104.0
Total	20.9	8.2	8	50.7

SOURCE —Department of the Environment, *Revenue Outturn Statistics Forms RO3A-E* (London, 1980)

NOTE —POSC as a percentage of service expenditure

s shows the existence and importance of what economists would call 'indivisible' capital equipment—physical (for instance, specialized institutions) and human (for instance, manpower with special skills and functions)—which can be provided economically only when shared by a larger number of recipients than need them in smaller authorities."⁴⁴ "Size" is the total population of a local authority area in 1978, and it is employed as a proxy for the scale of operation. We anticipate finding a negative relationship between this variable and capital-intensive residential services in particular.

Population density.—It is often asserted that the population density of an area will have a powerful influence on decisions about POSC. "Density" is the number of people per hectare in each local authority area. We expect to find this variable having opposing effects depending on the service in question. In the most densely populated cities where development land is scarce and prices are high, there is a powerful financial incentive to purchase rather than build expensive residential provision. This is particularly true in London, where the demand for available land has had historic influence on prices. We have included in our analyses, therefore, dummy variables representing London as a whole "London" as well as the inner "InLondon" and the outer boroughs "OutLondon." We expect to find a positive relationship between "Density" and/or the London dummy variables and all residential services. In contrast, however, a negative relationship between "Density" and day and community services is a possibility. Transport costs are such an important component of welfare provision in the more sparsely populated rural areas that significant cost savings can be obtained by relying on voluntary agencies to provide more informal services, such as meals on wheels and day centers for the elderly.

Levels of spending.—The relationship between the overall spending of a public agency and the proportion used for POSC is a potentially contradictory one. On the one hand, the normative literature suggests that the search for economy, or a perception of fiscal pressure, provides a powerful incentive toward POSC in the expectation that it will promote greater cost effectiveness. If there is any substance to this belief, one would expect to find a negative relationship between "Spend" (total public expenditure on personal social services per capita) and measures of contracting-out. A variant of this argument suggests that similar relationships will exist between POSC and "Budgetary Slack." The concept of budgetary slack is derived from the organizational sociology literature and is directly analogous to some key features of nonprofit agencies in the United States identified by Young and Finch: "... some agencies are more comfortably positioned than others in terms of resources, reserves, and external obligations to indulge their own internally conceived goal structures. . . . Such slack is characteristic of

INDEPENDENT VARIABLES	DEPENDENT VARIABLES				
	Homes for the Elderly	Residential Care for Children	Other Resi- dential Care	Nonresidential Care	Total POSC
Labour	- 292 (3 02)	- 498 (3 78)	- 439 (7 17)		- 246 (4 80)
Size	- 100 ^a (1 68)*				
Density		414 ^a (3 62)	776 (7 49)	459 (3 14)	521 (6 67)
London	196 (2 26)				
In London		435 (2 91)	338 (3 57)		
Out London		246 (2 57)	136 (2 20)		
Spend	478 (4 05)	613 (3 36)		281 (1 93)*	593 (7 06)
Budgetary slack					
Traditio	348 (6 35)				
Catholic.	097 (1 33)*				
Factor 1	191 (1 59)*				
Factor 2		480 (4 76)			
Factor 3		- 258 (3 30)			
Factor 4		- 118 (1 87)*			
R^2	80	68	78	52	86
\bar{R}^2	78	66	77	51	86
F	54.2	25.8	86.7	54.3	212.4
N	105	105	105	105	105

NOTE.—Numbers are standardized beta coefficients, *t*-statistics are in parentheses.

^a In these equations we have substituted the logarithm of the variable.

* Coefficients not significant at the 95 percent confidence level.

statistical relationship exists with nonresidential care. This adds further strength to the belief that not only have labour councils had a historic faith in public provision but they have wanted to see tangible evidence of their achievements, preferably in the form of bricks and mortar.

The regularity and strength of the positive relationship between the independent variable "Spend" and four out of five of the dependent variables support the hypothesis that one of the primary reasons for POSC is to supplement existing services rather than substitute for them. In addition, the notion that rational searches for the most cost-effective solutions to service delivery needs are not uppermost in the minds of key decision makers might well be supported by no significant coefficients emerging for "Budgetary Slack" in any of the models. The absence of statistical relationships between this variable and spending on POSC, however, is not particularly surprising. It reflects the fact that it is derived from a normative assessment of the objective needs of areas that is not commonly perceived by local decision makers and does not, therefore, exercise a powerful influence on their actual behavior. Of course, the question remains as to whether it should.

The third set of crucial independent variables—"Density" and the associated dummy variables—is positively related to all of the dependent variables. In general, the results are as predicted with "InLondon" having a more powerful influence than "OutLondon" in the two models where they are included. In one case, the relationship between "Density" and residential care for children is a nonlinear one, but this is perfectly acceptable. Unexpectedly, however, a positive relationship also emerges with nonresidential care. One of our colleagues has suggested that a possible explanation for this finding is that informal voluntary action is difficult to promote in sparsely populated areas because of physical communication difficulties. Hence a positive association with "Density" should be expected. However, it is also possible that the observations on the aggregate nonresidential dependent variable are particularly subject to measurement error. For example, the largest single item of expenditure on POSC that is included is for children in care who are boarded out. Many authorities are known to have supplied misleading data for this item, and there may be other systematic biases. Nevertheless, we will investigate the relationship between "Density" and some representative nonresidential services below.

As far as the other independent variables are concerned, the one most worth drawing attention to is our proxy for "Tradition." The availability of alternative suppliers appears to exercise a powerful influence on local authority POSC behavior with respect to residential homes for the elderly. This confirms our impression of the importance of traditional influences in our interviews and supports the conclusions of the early American literature, but questions the design assumptions of the APWA study discussed above. There is very little evidence in

our models to support the view that POSC is an important means of achieving economies of scale. "Size" is of limited importance in only one of the models. Similarly, "Catholic," our proxy for sectarian pluralism, is only significant at the 80 percent level in one of our models, although in this case it probably reflects at least as much the inability of the variable to capture what is intended as it does the true absence of any underlying causal relationship.

There are a number of difficulties in attempting to model any of the nonresidential social services, primarily because in most cases the extent of POSC is very small. This is exacerbated by the fact that a substantial number of authorities do not contract-out service provision for many of their services at all. As a result, conventional OLS regression analysis is not a suitable statistical technique. Instead, we must turn to what have been described as "qualitative response models" and their close relatives.³⁰ One possibility is to transform the data into a dichotomous dependent variable, where an authority takes the value of one if it uses POSC and zero if it does not, and use logit. However, this technique wastes a good deal of information about the variations in POSC among those SSDs that do contract-out. An alternative approach, therefore, that bridges the gap between logit and multiple regression is required, and this is provided by the tobit method.³¹ In fact, we make use of both logit and tobit to investigate whether the hypotheses outlined earlier help to account for variations among SSDs in POSC for three nonresidential social services—meals on wheels, day care for children under the age of five, and day centers for the elderly. Although our primary purpose is not to predict levels of POSC that might be expected for particular services, we must emphasize that even less reliance can be placed on the coefficients in the logit and tobit models than applied to the OLS results. In the circumstances, to avoid unnecessary complexity and improve readability, we report the asymptotic *t*-statistics and the signs on the coefficients only. Even so, these models do allow us to investigate whether any of the hypotheses have sufficient strength to establish a degree of statistical significance. The models were selected on the usual criteria of significance, parsimony, and common sense. For the logit models, we are able to compare the results against a constant-only model, but the computer program available to us did not offer this facility for the tobit equations. The findings, shown in table 5, are far from being unambiguous, but they do tend to lend support to some of our hypotheses and in part reinforce the regression results outlined above. "Labour" is negatively associated with POSC and the provision of meals on wheels and day centers for the elderly, but a positive relationship emerges with day care for children. The possible explanation for this unexpected finding is that ideological support for the program swamps any adverse concern about the form of provision. More than 58 percent of the POSC expenditure in this

Table 5

LOGIT AND TOBIT MODELS OF POSC VARIATIONS

INDEPENDENT VARIABLES	MEALS ON WHEELS		DAY CARE FOR CHILDREN UNDER 5		DAY CENTERS FOR THE ELDERLY	
	Logit	Tobit	Logit	Tobit	Logit	Tobit
Constant	3.01	3.20	.69*	-1.9	2.38	1.1*
Labour	-2.20	-1.14*	1.22*	.	-1.91	.
Size	-1.55*	.	1.75	.	.	.
Density	-2.92	.	.	6.1	.	2.0
London	.	.	.	.	.	.
InLondon	.	.	.	.	.	.
OutLondon	.	.	.	-2.9	.	1.0*
Spend	.	-1.93	-1.10*	.	.	1.2*
Budgetary slack	...	.	.	.	.	-2.4
Catholic	.	.	.	.	.	-1.1*
Factor 1	1.79	.	.	.	.	1.7
Factor 2	.	.	-1.61*	-2.4	.	.
Factor 3	.	.	.	.	.	.
Factor 4	1.21*	.	.	.	-1.61*	-2.3
Log likelihood	-61.4	25.6	-47.9	-8.1	-67.9	-33.1
LRTS*	22.6	.	0.3	.	7.6*	.
SIGMA	.	0.82	.	.22	.	26
N	105	105	105	105	105	105

NOTE —Numbers are asymptotic *t*-statistics

* Likelihood ratio test statistic

* Not significant at the 90 percent confidence level

area is for preschool playgroups, which are largely provided informal through voluntary groups in almost all areas; if they are to be supported, therefore, it is difficult to avoid POSC spending.

Along with "Labour," the other most important independent variable once again are "Spend" and "Density." On this occasion, however, the negative signs on "Spend," together with "Budgetary Slack" in our model, suggest that POSC is used as a substitute for direct service provision. Why there should be such a marked difference in the apparent rationale for POSC between our selection of nonresidential and residential services is not immediately clear and merits further investigation.

On the face of it the "Density" results are similarly confusing, with a negative sign in one model and positive signs in the others, but here there is a more satisfactory intuitive explanation. The negative relationship in the logit model for meals on wheels reflects the economic incentive to use volunteer drivers to deliver meals in sparsely populated areas where transport costs are a potentially high proportion of total costs. In contrast, the positive association between "Density" and POSC for the two day care services might reflect the fact that the capital requirements of the program in terms of their needs for buildings raise the same kind of problems of high land costs as for residential services. There are only a few other results worthy of note. The negative and positive signs for "Size" and "Catholic" in the logit and tobit models for meals on wheels and day centers for the elderly, respectively, provide some minimal supporting evidence for the economy of scale and sectarian pluralism hypotheses. In contrast, the positive association for "Size" in the logit model and the negative sign on "OutLondon" in the tobit model for day care for children both defy explanation.

Conclusion

The purpose of this article has been to investigate why public agencies purchase services rather than provide them directly. Contrary to popular belief, one of our conclusions is that the British experience of POSC is remarkably similar in many respects to that reported in the American literature. In particular, the reasons given by key actors in SSDs are as varied as those in the United States. The general impression given in both countries is that the beliefs and prejudices of local decision makers and the historical experience of different patterns of welfare provision in particular areas weigh much more heavily than any rational consideration of the arguments contained in the normative literature on the subject. Purchase of service seems to be much more a response to circumstances and events outside the direct control of public agencies.

than a conscious choice. Even where rationality does intrude, it appears to be relatively marginal. There is almost no evidence that public agencies on either side of the Atlantic take advantage of purchasing opportunities to plan an efficient mixed economy of social care applicable to their local areas.

One of the dangers of relying on the subjective perceptions of managers about the rationale for POSC is that their ex post facto impressions inaccurately reflect the underlying causes of the variations in purchasing behavior. As an antidote to this approach, therefore, we have presented the results of a preliminary statistical investigation of variations in POSC. The results outlined here must be regarded as tentative, but it is worth noting that few of the hypotheses derived from the literature and interviews are supported by the results. Even taking account of the undoubted deficiencies in the data, they add credence to the view that intuition rather than deliberation is what has guided the actions of POSC decision makers. As far as comparisons between England and America are concerned, the most interesting finding is the strength of political partisanship. Ideology seems to play a much larger role in accounting for POSC variations in England. It would be interesting to know how the other particularly significant result compares with American experience—that POSC is more of a supplement to, rather than a substitute for, direct provision.

Notes

We are grateful to our colleagues Ben Knox and Spyros Missiakoulis for making available their logit and tobit computer programs, and to Martin Knapp for advice and encouragement.

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Governor Reagan, Welfare Reform, and AFDC Fertility

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This study reports on the fertility response of AFDC women in Alameda County, California, to welfare reforms initiated by Governor Reagan in 1970–71. The fertility of AFDC women did not increase when monthly welfare benefits rose substantially, or even when the marginal benefit for an additional child rose. The availability of legal abortion, however, appears to have significantly lowered the fertility of these women. An AFDC policy change is suggested by the third finding that increased years of education for the young welfare mother with only one child sharply lower the probability of her having additional children while on AFDC.

While governor of California from 1967 to 1974, Ronald Reagan sought to reform welfare in order to hold down Californians' taxes. He hoped to stop the apparently exploding growth of the welfare caseload and expenditures by eliminating from the Aid to Families with Dependent Children (AFDC) those recipients who were able to work or who had more than a very small amount of assets.¹ The political strategy used to convince the Democrat-controlled California Legislature to adopt tighter eligibility requirements was first to declare a welfare crisis and announce a budget ceiling for total welfare expenditures. Then voters were requested to express their support for this ceiling to their legislators. Finally, legislators and recipient groups were invited to decide on how to divide up this fixed budget among the truly needy, the not so needy, and the "welfare cheaters."

The 1971 California Welfare Reform Act that emerged from this political process tightened up eligibility requirements somewhat, lowered

the welfare grant to those AFDC families who worked part-time in low-wage jobs, and at the same time significantly increased the monthly welfare grant to those AFDC families who had no income and were unable to work.²

Table 1 includes a schedule of the maximum monthly welfare grant in the late 1960s and early 1970s for a typical AFDC family. Table 2 adjusts the real level of monthly welfare benefits with food stamps and inflation taken into account. Table 3 shows the additional monthly benefit given to a family if it had one more child at different times in the late 1960s and early 1970s. The changes in real monthly welfare benefits over time shown in these tables offered some incentive to AFDC mothers to increase their fertility. This study attempts to find out whether the rise in welfare benefits actually did induce higher fertility for AFDC mothers.

About 93 percent of welfare cases received the full increase in welfare benefits in 1970-71, according to statewide statistics and an actual sampling of Alameda County welfare cases.³ Only about 7 percent of welfare families became ineligible for welfare, had a reduction in their grant, or received a smaller than maximum increase.

Now that Reagan is president, he has successfully used the same strategy to persuade Congress and the states to enact similar changes in the AFDC program across the nation.⁴ The new rules include lower income limits for cutting off welfare eligibility, optional "workfare" programs that states may implement, and benefit increases for many of those unable to work at all due to having a child under age six in the home. One change that is unlike the earlier California welfare reforms is a substantial decrease in the incentives for a welfare mother to accept a low-paying job in the hope of "working her way off welfare" after a period of a few years.⁵

Short-run projections of the net fiscal effects of such reforms in the AFDC program depend mainly on three things: the decrease in the number of families eligible for welfare, the number of families still on AFDC but receiving reduced welfare benefits, and the number of families receiving benefit increases. The Health and Human Services Department hopes that \$11 billion will be saved from 1981 to 1986 by the 1981 rule changes.⁶

What may not be so obvious in longer-term projections of the fiscal consequences of changing the AFDC program are the effects on the number of recipients arising from changed incentives: (1) increasing the welfare grant to families eligible for the maximum grant (the "truly needy") may lead directly to a change in the fertility of AFDC mothers, and (2) decreasing the incentives for a welfare mother to "work her way off welfare" may lead her to accept lifelong welfare dependence and resign herself to having more children. Any additional children born into AFDC families as a result of increased welfare grants for

Table 1

MAXIMUM PARTICIPATION BASE, CALIFORNIA, 1966-74
MAXIMUM MONTHLY CASH PAYMENTS TO AFDC FAMILIES, EXCLUDING FOOD STAMPS (\$)

TIME PERIOD	AFDC-FG, WOMEN WITH 1 CHILDREN								
	1	2	3	4	5	6	7	8	9
Jan 1966-May 1971	148	172	221	263	300	330	355	373	386
June 1971-Sept 1971	176	204	261	311	333	388	416	437	450
Oct 1971-May 1973	190	235	280	320	360	395	430	465	500
June 1973	192	237	282	322	362	397	432	467	502
July 1973-June 1974	197	243	290	331	372	408	444	480	516

SOURCE—California Statutes, 1965, C. 1784, 1971, C. 578, Welfare and Institutions Code § 11450, and California Department of Social Welfare, *Manual of Policies and Procedures*, § 44-313, § 63-4543 and revisions

Table 2

SCHEDULE OF REAL WELFARE BENEFITS, CALIFORNIA, 1967-73
CONSTANT-DOLLAR TOTAL BENEFITS, INCLUDING FOOD STAMPS (\$)

MONTH	AFDC-FC, WOMAN WITH A CHILDREN									
	0	1	2	3	4	5	6	7	8	9
Nov 1967	0	148	172	221	263	300	330	355	373	386
Nov 1968	13	155	182	235	279	318	351	378	399	416
Nov 1969	13	146	172	221	263	300	331	357	377	392
Nov 1970	24	159	202	247	289	324	358	383	412	432
Nov 1971	27	183	235	273	317	356	392	424	459	486
Nov 1972	29	179	231	269	311	344	382	415	448	482
Nov 1973	29	176	226	264	307	340	377	415	447	473

SOURCES.—California Statutes 1965, C. 1784, 1971, C. 578, Welfare and Institutions Code § 11450, and California Department of Social Welfare, *Manual of Policies and Procedures*, § 44-313, § 63-4543, and various revisions. Deflator series 1967, 1 000, 1968, 1 044, 1969, 1 107, 1970, 1 172, 1971, 1 206, 1972, 1 260, 1973, 1 314 CPI for food and housing, San Francisco-Oakland SMSA, *Economic Indicators*, Bureau of Labor Statistics

Table 3

MARGINAL BENEFIT FOR AN ADDITIONAL CHILD, CALIFORNIA, 1967-73
CONSTANT-DOLLAR MARGINAL BENEFIT, INCLUDING FOOD STAMPS (\$)

MONTH	AFDC-FG, WOMAN WITH (N - 1) CHILDREN, FOR NTH CHILD								
	1	2	3	4	5	6	7	8	9
Nov 1967 ..	148	24	49	42	37	30	25	18	13
Nov. 1968	142	27	53	44	39	33	27	21	17
Nov 1969	133	26	49	42	37	31	26	20	15
Nov 1970	135	43	45	42	35	34	25	29	20
Nov 1971	156	52	38	44	39	36	32	35	27
Nov 1972	150	52	38	42	33	38	33	33	34
Nov 1973	147	50	38	43	33	37	38	32	26

SOURCE —Derived from table 2

the neediest families will be supported by public funds for many years. Furthermore, if AFDC fertility is increased, we may see a growth in the number of families caught in the "poverty cycle" of lifelong, intergenerational dependence on AFDC.

This study reports on this last aspect of California's experience with welfare reforms in 1971. Did the legislated rise in welfare benefits for the great majority of families induce higher fertility for AFDC mothers? Did it lead to unanticipated increases in welfare expenditures?

The following findings are based on the fertility histories of women in a sample of 3,155 families on AFDC in Alameda County, California, some time between 1967 and 1973. The data include age, education, and many other demographic variables for each mother, plus information on all welfare and fertility experience for her family through 1974. Welfare case files were not usually available for inspection in California at that time, even by researchers. An exception was made for the large welfare and employment study of which this is a part.⁷ By using multiple regression techniques, the data allow us to see if the 1971 exogenous change in base benefits (family income) and in marginal benefits for an extra child had any effect on AFDC fertility.

Fertility Incentives Arising from the AFDC Program

To be eligible for participation in the AFDC program in any state, a family must have children who have been deprived of parental support or care by reason of death, continued absence from the home, or physical or mental incapacity of a parent. In addition, the Social Security Act allows individual states the option of providing AFDC to families of children whose fathers are unemployed.

The very existence of the AFDC program, therefore, may be an incentive to a young woman, whose alternative economic prospects are not good, to have a child and become eligible for public assistance. An increase in welfare benefits may create additional fertility incentives. Presumably any increase in the benefits given to AFDC families would increase the attractiveness of the AFDC program and lead more young women to have a first child. Furthermore, an increase in welfare benefits might lead some women who already have a child, but are not on AFDC, to apply for AFDC benefits. Finally, an increase in welfare benefits might induce some women already on AFDC to have an additional child that they would not have had if the benefits had stayed at a lower level.⁸

This study tests only the third possibility: that the population of women already on AFDC will increase its fertility when welfare benefits are increased. Since the data show the current fertility of the Alameda County AFDC population (sampled at different times during a seven year period centered around when benefits were increased significantly) we must bear in mind that the composition of that population may have changed due to the increased benefits.

If the increased benefits were causing some women to be on AFDC who would not otherwise have been on welfare, and these women reacted differently in their current fertility from women who would have been on AFDC anyway, then the current fertility rates for the AFDC population may have been altered, independent of the fertility effect of increased benefits for women already on AFDC. The hope is that by having controlled for the demographic characteristics of the individual AFDC mother, whether she was ever on AFDC before, and the amount of time she had currently been on AFDC, any bias in fertility rates introduced by the changing composition of the population has been eliminated or minimized.

While the data concern only the current fertility of women who were already on AFDC, with at least one child, it may be possible to reach some conclusion about whether the existence of the AFDC program (or a high level of AFDC benefits) induces some young women to have a first child. If the current fertility of the AFDC women studied cannot be explained well by our economic, sociological, or demographic variables, then we have some evidence for the hypothesis that their past fertility also was not based on those factors. If instead their current fertility behavior is caused by psychological characteristics or by unusual personal circumstances, it is likely that they did not make their past decisions to have a first child for economic motives, such as the existence of the AFDC program or the level of welfare benefits. On the other hand, if we find that the current fertility of AFDC mothers is significantly affected by the level of welfare benefits, we must conclude that the existence of the AFDC program and the level of benefits may be quite important to many young women in deciding to have a first child.

Past studies of the relationship between the AFDC program and fertility have been numerous but have not provided strong evidence for the above hypothesis.⁹ Empirical work has suffered due to the noncomparability of different state AFDC programs, from aggregation problems in using state-level data, from incomplete individual data, or from a relatively small number of AFDC cases.¹⁰

In spite of their weaknesses, past empirical studies have concluded that neither the existence of the AFDC program nor the level of welfare benefits has an effect on fertility. These studies have tended to focus on the birth of the first child, which makes the mother eligible for welfare, or on the total number of children already born to women.

on welfare. They have not addressed the question for which these data seem appropriate: Does an increase in welfare benefits affect the current fertility of women already on welfare? If the data indicate that current fertility of every age group is not affected by the welfare benefit level, then we also have evidence that lifetime fertility for AFDC women is not affected.

Empirical Results

The primary question to be answered here is whether or not the fertility of AFDC women rose when welfare benefits were increased significantly in 1970–71. The dependent variable we are interested in is whether or not the mother in a sample AFDC case became pregnant during a specific time period and subsequently carried the baby to term. The main independent variables that may explain whether or not she became pregnant and gave birth include her personal characteristics, as well as the basic level of welfare benefits, and the marginal benefit for her if she should have an additional child.

$$\text{pregnancy} = f(\text{welfare benefits, marginal benefits, personal characteristics}). \quad (1)$$

To test this hypothesis, welfare cases in Alameda County were examined over an eight-year period surrounding the welfare reform years of 1970–71. A random sample of approximately forty-five active welfare cases was picked from the Alameda County roles for each month from January 1967 through December 1972. Strenuous and successful efforts were made to track down the folder for every welfare case selected for 1967, 1968, 1970, and 1972. To save money, only those cases were recorded for 1969 and 1971 for which the case folder was in its normal place in the 1974–75 period when the sampling was actually conducted. (Any bias for 1969 and 1971 is probably not significant because the multiple regressions control for so many variables.)

A total of 3,155 welfare cases were actually chosen in the six sample years. Whether or not the AFDC mother gave birth in each of the seven calendar quarters immediately following her sampling month was recorded. From this it was inferred whether she became pregnant (and subsequently carried to term) in the first four calendar quarters after being sampled. To test hypotheses concerning fertility, cases were used only if the woman was in the home, was under age forty-five, and was not currently pregnant. These criteria resulted in 7,243 sample observation quarters in which the woman might have become

pregnant. About one-third of the sample quarters were after the welfare reforms. A total of 161 full-term pregnancies occurred in the sample quarters.

Because the dependent variable in an individual observation was whether the woman became pregnant in a calendar quarter, it could only have two possible values: Yes or No. Unfortunately, having a discontinuous dependent variable of this sort makes ordinary least-squares regression analysis unsatisfactory.

The problem was dealt with by changing the dependent variable to the probability of pregnancy for an individual woman in the three-month time period following being sampled (and carrying the baby to term), and then using a logit regression.¹¹

The sampled cases were separated into two groups for analysis because there are two different AFDC programs in California. The "usual" AFDC program is termed AFDC-Family Group (AFDC-FG). An AFDC-FG case consists of one parent only and her or his children in the home. The other AFDC program is called AFDC-Unemployed Parent (AFDC-U). An AFDC-U case consists of the children and both parents, with neither parent employed more than half-time. These two-parent AFDC-U cases comprise from 5 to 15 percent of all AFDC cases in California at different times, seemingly depending on how high unemployment is in the state.

The fertility behavior of AFDC-FG cases may be considerably different from AFDC-U cases because the women in AFDC-FG cases may view welfare dependence as a permanent feature of their lives, while the AFDC-U families may see their welfare status as only a temporary setback in a more economically prosperous and secure life. The effect on fertility of particular personal characteristics or of public policy variables is apt to be quite different for the two different types of cases. Hence, the specifications for using the data separated the AFDC-FG cases from the AFDC-U cases. This study reports only on the empirical results for the numerically more important AFDC-FG mothers. AFDC-U results will be reported in another study.

The independent, public policy variables that might affect the probability of the n th birth are the level of public support for a typical welfare family (which changes over time) and the marginal benefit for the n th child (where the negative of changes over time represents changes in the cost of the n th child over time).

Another public policy variable that changed from the 1960s to the 1970s was legalization of abortion. Although the California Therapeutic Abortion Act of 1967 was a liberalized abortion law, it was not until about 1971 that legal abortion services were widely available and legitimized to the extent that they had a noticeable impact on fertility for all women in California.¹² Since legalized abortion was an option

for a welfare mother who became accidentally pregnant, the reported county-wide abortion rate is included at each quarter as a proxy for the availability of abortion to these women.

The variables that were specific to each case included the standard demographic variables, such as age, ethnic group, education, and parity, as well as fifteen other variables describing the personal, family, and welfare history of each case. In order to fit all available observations with twenty-six potential independent variables into the limited computer memory space and to facilitate discussion of the effects of the independent variables, the twenty-six variables were grouped into five classes: (a) public policy variables, (b) time control variables, (c) personal characteristics of the mother variables, (d) the mother's fertility history variables, and (e) welfare background and family stability variables.

Because estimating the effect of the public policy variables on fertility was the main purpose of the study, they were included in every specification. However, since only fifteen variables at a time could be held in memory space for 4,000 AFDC-FG observations, a selection of variables from each class had to be made for any one specification, and a number of different specifications had to be run to see the effects of every variable. The need to run different specifications had the side effect of testing the possibility that some subgroups of the population reacted substantially differently from other subgroups in regard to certain variables.

Regression results.—The main finding from the logit regressions of AFDC women's fertility in Alameda County, 1967–74, is that the level of welfare benefits had no effect on the probability of a welfare mother becoming pregnant and having an additional birth while on welfare. A secondary, but interesting, finding is that AFDC-FG women did not seem to make fertility decisions as “economic creatures.” The fertility behavior of the AFDC-FG mothers was not well explained by the variables that an economist or a demographer usually believes may be important.

Table 4 reports the results of the most useful single logit regression for all AFDC-FG cases. It shows the effects of public policy variables and personal or family characteristics on an AFDC-FG woman's fertility. The specification in table 4 included fifteen variables that test hypotheses about the fertility effects of public policy, or that often have been associated with differing levels of fertility, or that previous specifications¹³ had shown to be interesting. Table 5 lists and describes all the independent variables that were tested in the multiple regressions.

Public policy variables.—Looking first at the public policy variables, we see that the overall level of welfare benefits provided to a typical AFDC-FG family of one parent and three children (Benefit Level) had no effect on the fertility of women already in the AFDC-FG program.

Table 4

LOGIT REGRESSION ESTIMATE OF THE EFFECTS OF FIFTEEN
VARIABLES ON THE FERTILITY OF AFDC-FG MOTHERS, AGE
FIFTEEN TO FORTY-FOUR

Independent Variable	Coefficient	t-Statistic
Constant	.0904	.03
BENF	-.0025	-.20
MB	-.0040	-.32
AAI	-.0074	-1.25
Q	-.1330	-1.26
T	.0229	.96
AGE	-.0794	-3.01
EDUC	-.0181	-.25
BLK	.1330	.48
SSN	.5253	1.32
CALRES	-.6778	-2.31
PAR	-.051	-.55
MARR	.2621	.95
CHW	.9642	3.42
TYPE	-.2709	-.88
MONTHS	-.0016	-.32

SOURCE—Alameda County, Welfare Sample

NOTE.—Specification FG-5, all cases, mean probability of pregnancy = .0215 ($N = 3,998$). This AFDC-FG sample consists of up to four successive quarterly observations per case, where the case was observed to be open at the start of the quarter, the woman was present, she was aged fifteen to forty-four, she was not pregnant, and no adult male was living in the home. See table 5 for definitions of the independent variables.

We also see in table 4 that the amount of extra benefits a particular family would receive if it had one more child while on welfare (Margin Benefit) did not influence fertility.

The third public policy variable, the availability of legalized abortion under the MediCal Program¹¹ for AFDC women, may have had a economically significant negative impact on AFDC-FG fertility. Though the *t*-statistic for the abortion availability index (AAI) is only moderate high at -1.25, let us speculate on the actual impact on AFDC-FG fertility possibly resulting from legalizing abortion.

Under a logit specification, the effect of a change in one of the independent variables on the probability of birth depends on the level of the probability. Starting from the observed probability of birth within a quarter from table 4 for the 3,998 observations with no missing information, we find:

$$\frac{\partial P}{\partial X_i} = P(1 - P)\beta_i = .0215(.9785)\beta_i = .0210\beta_i,$$

where P = probability of pregnancy, and β_i = coefficient of the i th variable.

If we assume that our estimated coefficient for AAI is equal to the true coefficient, then a unit change in the abortion-availability index would have changed the probability of a pregnancy occurring and being carried to term by $.0210(-.0074) = -.000156$. From 1967 through 1973, our abortion availability index (one-tenth the number of legal abortions performed in Alameda County during the quarter) rose from zero to 242. Hence, ΔP would be: $-.000156(242) = -.0376$. If we should allocate this change in probability equally around the overall observed probability of .0215, we would find that the availability of legalized abortion seemed to cause AFDC-FG fertility to be 93 percent lower by 1973-74 than it would otherwise have been. Unfortunately, we do not know to what extent legalized abortion was used as a substitute for the usual methods of contraception. If we estimate that only 20 percent of abortions were actually preventing births that would have occurred in the absence of legalized abortion, then the net effect of legalized abortion would be to reduce the probability of full-term pregnancy by $-.0076$. Allocating this change around the mean equally would imply that the net effect of legalized abortion was to reduce AFDC-FG fertility by 30 percent by 1973-74.

The first three variables we have looked at are public policy variables. We have found that for AFDC-FG mothers, the level of welfare benefits and the extra welfare benefit for an extra child had no effect on fertility. We have also found that the availability of abortion probably had an important effect on reducing fertility.

These results concern only women already on welfare and tell us nothing directly about how women with no children will react to changes in welfare benefits or to the availability of abortion. They do illustrate, however, the dilemma of the American taxpayer who wants to keep welfare spending down and yet not have the government pay for legal abortions for AFDC women. If these women cannot afford abortions, their fertility rates may rise greatly, as well as welfare costs. In California in 1979, the directly added welfare cost of another child to a woman already having two children was about \$900 per year. Indirectly added costs from reducing her chances of getting off welfare could be added to this. Wiseman has estimated that the chances of an AFDC-FG family leaving welfare in one year are reduced by 18 percent by the presence of another child.¹⁵

Time control variables.—Looking next at the time control variables, we see that neither Q , the number of the quarter of observation (1, 2, 3, or 4), nor T , the number of the month at the start of the quarter of observation (January 1967 = 1), has a coefficient that differs significantly from zero. Yet Q , the number of the quarter of observation,

Table 5

DESCRIPTIONS OF VARIABLES

Type of Variable and Symbol		Variable Name	Explanation of Variable
Dependent			
PQ*		Got pregnant in quarter	Did the woman get pregnant this quarter?
Independent			
Controls			
Q*		Quarter	Is this quarter 1, 2, 3, or 4 for this case?
T*		Month	Month 1-81, the number of the month at the start of the quarter of observation from January 1967 = month 1
Policy			
BENF*		Benefit level	Real benefit level per month at start of each quarter, for an AFDC-FG case, use the benefit level for 1 parent and 3 children
MB*		Marginal benefit	Extra benefit per month family could get if they had one more child
AAI*		Abortion availability index	One-tenth the number of legal abortions reported in Alameda County in a 3-month period approximately 3 months after the start of the quarter
Mother's personal characteristics			
AGE*		Age	Mother's age in years at start of each quarter
EDUC		Education	Highest education level completed
BLK		Black	Is mother a black woman?
SSN		Spanish surname	Does family show a Spanish-heritage culture in the home?
CALRES		Long-time California resident	Was mother a California resident for more than 5 years at sample date?
SOUTH		Born in South	Was mother born in the southern states?

has a *t*-statistic of about 1, which indicates that there was some serial correlation problem and that, as might be expected, we have no identified all factors that influence the probability of pregnancy and birth.

Background variables.—Looking at those variables that describe the background of the mother, we see that being an older woman or having been a California resident for at least five years significantly reduced the probability of an AFDC-FG woman's having another child while on welfare. A woman having been on welfare herself as a child significantly increased her probability of pregnancy. Variables that we cannot say independently influenced fertility include the woman's education, ethnic group, parity, whether she had ever been married whether her family was ever on the AFDC-U program, and the number of months it was receiving assistance.

Two subgroup regressions¹⁶ led to an interesting hypothesis concerning the link between education and fertility for AFDC mothers as shown in table 6. The independent effect of education on fertility is very strong for AFDC-FG women under age twenty-four and AFDC-FG women with only one child. The change in fertility implied by the estimated coefficient indicates that a single added year of education completed for an AFDC-FG mother of young age or of parity 1 meant a reduction in the probability of pregnancy of over 20 percent. Perhaps

Table 6

LOGIT REGRESSION ESTIMATE OF THE EFFECTS OF FIFTEEN VARIABLES ON THE FERTILITY OF AFDC-FG MOTHERS, AGED FIFTEEN TO TWENTY-THREE OR WITH ONLY ONE CHILD

INDEPENDENT VARIABLE	Specification FG-6, age 15-23, mean probability of pregnancy .0401 (N = 1,121)		Specification FG-13, parity 1, mean probability of pregnancy .0303 (N = 1,123)	
	Coefficient	t-Statistic	Coefficient	t-Statistic
Constant	-.1990	-40	.4574	.86
BFNF	.0060	.33	-.0168	-.78
MB	.0051	.34	.0030	.10
AA1	-.0084	-1.02	-.0064	-.70
Q	-.3015	-1.99	.1523	.91
T	.0189	.57	.0344	.94
AGE	.1292	1.24	-.0509	-1.34
EDUC	-.2919	-2.54	-.2402	-2.16
BLK.	.2066	.52	-.1864	-.46
SSN	.2985	.52	.0111	.02
CALRES	-.8464	-2.01	-.4485	-.92
PAR	-.2749	-1.18	...	..
MONTHS	-.0096	-.82	-.0270	-1.74
MARR	-.2664	-.67	.6701	1.53
CHW.	.5512	1.48	.7933	1.66
TYPE	-.4792	-1.08	-.2328	-.38

SOURCE—Alameda County Welfare Sample

NOTE—See table 5 for definitions and descriptions of variables

these women saw the possibility of securing a good-paying job and the opportunity to get off welfare permanently by avoiding another pregnancy.

A public policy suggestion from the findings in table 6 is that AFDC-FG programs that want to keep costs down should make strenuous efforts to get young, first-time welfare mothers with low education back into school as soon as possible after the birth of their first child.

The overall assessment of the fourteen regressions for AFDC-FG women is that the level of welfare benefits had no effect on fertility, that increased abortion availability may have lowered fertility considerably, and that AFDC-FG fertility in general was quite poorly explained by looking at twenty-six variables that were thought to be important. Evidently, a great many AFDC-FG women either (1) make no conscious decision about avoiding or becoming pregnant or (2) actually decide on pregnancy for reasons that public policy can neither pinpoint nor influence without excessively intruding on people's private lives

Conclusions and Implications for Welfare Reform

The multiple regressions in this study were employed to try to answer the question, Did the fertility of welfare women tend to rise because of increases in welfare benefits in California in 1970-71? The regressions have had the advantages of simultaneously controlling for many personal characteristics of the mothers that might have affected fertility and of partially overcoming the complications caused by abortion availability that was increasing at the same time the benefits were rising.

The regressions have led us to several conclusions.

1 The level of welfare benefits given to a typical welfare family does not affect the fertility behavior of AFDC-FG mothers.

2 The amount of extra benefits given to a welfare family if it has one more child does not affect the probability that such a child will be born to a woman in the AFDC-FG program.

3. The availability of legal abortion may have a strong impact on the level of AFDC fertility. In light of the ongoing debate in Congress and state legislatures about public funding of welfare abortions, this result is of immediate importance. We must note, however, that the statistical significance of this finding is not quite as high as a social scientist is willing to accept, and that this research cannot tell what proportion of welfare abortions are simply a costly substitute for contraceptive methods of birth prevention versus what proportion lead

to a net reduction in unwanted births that would occur but for the legal, subsidized abortion.

4. The fertility of AFDC-FG mothers not living steadily with a man is poorly explained by our model that included twenty-eight variables related either to public policy or to the personal and family characteristics of the individual women.

The birth of a first child that causes a young, single woman to go on AFDC-FG may be explainable in many cases by psychological factors: such as her need to establish self-identity and gain respect from achieving motherhood, or her need to have unquestioning love from her own child. Nonetheless, the decision to conceive and bear subsequent children while already on welfare seems unlikely to depend on such psychological factors. Perhaps for some part of the AFDC-FG population, the woman chooses to become pregnant when she has a tenuous relationship with a man that she believes will become more permanent and stable if she bears his child.

5. This research indicates that the only demographic factors that lead to a higher probability of pregnancy for AFDC-FG mothers are: (a) a low education completed by young mothers or by those with only one child, (b) being a white woman who is a new migrant into California and (c) being a black woman who has experienced living on welfare as a child.

This study has sought to answer a few questions of interest to public finance and urban economists, to demographers, and to others who are concerned with poverty issues. The evidence is inconsistent with the image of welfare women having extra babies to collect extra benefits. It is also inconsistent with a more serious theory, which predicts that fertility will rise if women's permanent income rises but their social class does not change.

We can draw some inferences from this study concerning the probable effects on the fertility of welfare families in the United States when Reagan's welfare reform proposals are implemented nationwide, as they were in California.

The evidence here suggests that the fertility of the poor on welfare will not rise if we adopt a national minimum welfare standard that substantially raises the income level in several states. Nor will fertility fall in those states where the welfare grant is lowered.

Even among teenage women with no children, it seems unlikely that there will be any positive or negative fertility effect from broadening or from tightening welfare eligibility criteria or changing the publicly subsidized standard of living. The evidence is that the fertility behavior of mothers already on AFDC-FG does not seem to be tied to economic factors, and we are led to conjecture that their initial decisions to have a child are not motivated by economic considerations either.

Any changes in our laws that affect the availability of abortion may have major consequences for the level of fertility of the poor. This study has shown that there is apt to be an enormous increase in the fertility of those on welfare if abortion is not available, though we cannot yet be sure how much of the abortion effect is a substitute for prior contraception. Clearly, the debate on public funding of abortions for the poor would be better formulated if more research were done on the net effect of freely available abortion on fertility.

Finally, we must note that the desperate cries for complete overhauling of our welfare system in the early 1970s have decreased in the last five years as the welfare "explosion" of 1965–75 has diminished. President Reagan is attempting some limited welfare reforms now that seem to be based more on theories, hopes, and a shortage of funds rather than on established facts. Independent research on the effects of these welfare reforms on the behavior of actual and potential AFDC recipients is needed.

Notes

The data for this paper were obtained from a larger study supported by the Department of Labor under the direction of Michael Wiseman of the Department of Economics, University of California, Berkeley. I gratefully acknowledge the assistance of Michael Wiseman and the comments of Charles Baird.

1 Later studies by Barbara Boland ("Participation in the AFDC Program," in U.S. Congress Joint Economic Committee, *Studies in Public Welfare*, paper no. 12, pt. 1, November 1973) and by Cynthia Rence and Michael Wiseman ("The California Welfare Reform Act and Participation in AFDC" [Working paper no. 81, University of California, Berkeley, Institute of Business and Economic Research, 1976]) have shown that the growth of the welfare caseload in California of the late 1960s had actually stopped before the welfare reform program started, due to the fact that nearly 100 percent of the eligible population was enrolled by 1970.

2 A sympathetic review of Reagan's eight years as governor, including the welfare reform program, may be found in William Boyarsky, *Ronald Reagan. His Life and Rise to the Presidency* (New York: Random House, 1981). A detailed outline of the proposals and purposes for welfare reform from the Reagan administration's point of view is in the State of California Governor's Office, *Welfare Reform in California: Showing the Way* (Sacramento, 1972). A comprehensive economic and legal review of the welfare reforms from an academic point of view may be found in Frederick Doolittle and Michael Wiseman, "The California Welfare Reform Act: A Litigation History" (Working Paper no. 71, University of California, Berkeley, Institute of Business and Economic Research, 1976).

3 David Keefe, "Welfare and Childbearing in Alameda County, California: How Much Can Economics Explain?" (Ph.D. diss., University of California, Berkeley, 1981), pp. 53–56.

4 The *Federal Register* (September 21, 1981) outlines changes in administrative rules for AFDC, implementing congressional amendments to the Social Security Act.

5 Michael Wiseman, "The Impact of the Reagan Reforms on the California Welfare Caseload" (Working Paper no. 82-1, University of California, Berkeley, Institute of Business and Economic Research, 1982).

6 United Press story in *San Francisco Chronicle* (September 22, 1981).

7 The sampling was conducted by Professor Michael Wiseman and his assistants in the Welfare and Employment Studies Project under the Institute of Business and Economic Research, University of California, Berkeley. For a more complete description of the data and the collection procedure, see Richard Booth and Michael Wiseman, *Income Dynamics Project: County Welfare Sample Location and Codebook* (Berkeley: University of California, Institute of Business and Economics Research, 1976), and Michael Wiseman, "County Welfare: Caseload Growth and Change in Alameda County, 1967-73" (Working Paper no. 72, University of California, Berkeley, Institute of Business and Economic Research, 1976). Hereafter the sample will be referred to as the Alameda County Welfare Sample.

8 See Keele (in 3 above), pp. 65-85, for the fertility effects predicted by different theories for a welfare benefit increase.

9 The theoretical, speculative, or simulation studies include Glen Cain, "Effect of Income Maintenance Laws on Fertility in the U.S.," in *Aspects of Population Growth Policy*, ed. R. Parke and C. Westoff (Washington, D.C.: Government Printing Office, 1973), available as reprint no. 138, Institute for Research on Poverty, University of Wisconsin—Madison; J. Sweet, "Some Demographic Aspects of Income Maintenance Policy," in *Income Maintenance*, ed. L. Orr (Chicago: Markham Publishing Co., 1971); *Report of President's Commission on Income Maintenance* (Washington, D.C.: Government Printing Office, 1969); J. Vadaktian, *Children, Poverty and Family Allowances* (New York: Basic Books, 1968); Kingsley Davis, "Some Demographic Aspects of Poverty in the United States," in *Poverty in America*, ed. M. Gordon (San Francisco, 1965), and "The Birth Rate and Public Welfare in California" (testimony before the State Social Welfare Board, San Mateo, Calif., July 1972), and Martha Phillips, "Family Impact and Welfare Reform" (working paper of Group on Conceptual and Moral Issues in Welfare Reform, University of Maryland, reprinted in *Welfare Research and Experimentation, Hearings before U.S. Senate Subcommittee on Public Assistance*, 45th Cong., 2d sess., November 16, 1978).

10 Empirical studies that shed some light on the facts of the welfare-fertility relationship include Glen Cain and Julian and Ruth Simon, communications in *Family Planning Digest*, vol. 2 (November 1973); B. Janowitz, "The Impact of AFDC on Illegitimate Birth Rates," *Journal of Marriage and the Family* (August 1976); Phillips Cutright, "Illegitimacy and Income Supplements" (Joint Economic Committee Study Paper no. 12, November 1973); A. Fletcher and S. Greenfield, *Welfare and Illegitimacy: An Economic Model and Some Preliminary Results* (Washington, D.C.: Urban Institute, August 1973); Kristen Moore and Steven Caldwell, "The Effect of Government Policies on Out-of-Wedlock Sex and Pregnancy," *Family Planning Perspectives*, vol. 9 (July/August 1977); Harriet Pressner and Linda Salsberg, "Public Assistance and Early Family Formation—Is There a Pronatalist Effect?" *Social Problems*, vol. 23 (December 1975); C. Winegarden, "The Fertility of AFDC Women: An Econometric Analysis," *Journal of Economics and Business*, vol. 26 (Spring 1974); Paul Placek and Gerry Hendershot, "Public Welfare and Family Planning: An Empirical Study of the 'Brood Sow Myth,'" *Social Problems* 21 (June 1974): 658-73; James Cramer, "Births, Expected Family Size and Poverty," in Morgan et al., *5000 American Families* (Ann Arbor: Institute for Social Research, University of Michigan); Frances Van Loo Flanagan, "The Effect of Welfare Payments on Fertility" (report to Rockefeller-Ford Program on Social Science and Legal Research on Population Policy, January 1975); and Melvin Zelnick and John Kantner, "Sexual and Contraceptive Experience of Young Unmarried Women in the United States, 1976 and 1971," *Family Planning Perspectives*, vol. 9 (1977).

11 See Daniel McFadden ("Conditional Logit Analysis of Qualitative Choice Behavior," in *Frontiers in Econometrics*, ed. P. Zarembka [New York: Academic Press, 1974]) and Takeshi Amemiya ("Qualitative Response Models: A Survey," *Journal of Economic Literature* 19 [December 1981]: 1483-1536) for the usefulness of the logit regression in a case like this.

12 Edwin W. Jackson, "California's Abortion Legislation and Its Demographic Effects," in *California's Twenty Million: Research Contributions to Population Policy*, ed. K. Davis and F. G. Styles (Berkeley: University of California Press, 1971); and Jane Sklar and Beth Berkov, "The Effects of Legal Abortion on Legitimate and Illegitimate Birth Rates: The California Experience," *Studies in Family Planning* 4 (November 1973): 281-92.

13 Regression results with four other specifications for all AFDC-FG cases and on nine separate subgroups of the cases are available from the author

14 MediCal is California's implementation of the national Medicaid Program under the Social Security Act

15 Wiseman (n 7 above)

16 Available from the author are the results of nine more regressions that subdivide the 4,000 observations by age group, education group, ethnic group, and parity. The purpose of these regressions was to see if any major subgroup of the AFDC-FG mothers significantly changed their fertility in response to changes in the level of welfare benefits, even though the group as a whole had no response. In those regressions, no age group, no education group, no ethnic group, and no parity group, when looked at separately, showed a significant change in fertility as a result of the increase in welfare benefits (Benefit Level and Marginal Benefit)

The Concept of Paternalism in Social Work

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The phenomenon of paternalism—interfering with an individual's freedom for his or her own good—is prevalent in contemporary social work. Despite its visibility, however, the concept has received little attention in the profession's literature. This article examines the philosophical origin and evolution of the concept of paternalism and discusses its relevance to the practice of social work. Particular attention is given to the problems of justifying paternalistic actions in social work and establishing criteria to determine when paternalism is warranted.

The profession of social work has paid substantial attention over the years to the right that clients have to pursue goals that they have established. It is generally considered unfashionable in contemporary social work to tell clients what to do, especially if such a command conflicts with the client's own preferences. The principle that has served as the intellectual foundation of this widely held belief is that of self-determination and the client's right to it. For example, the profession's code of ethics explicitly states, "The social worker should make every effort to foster maximum self-determination on the part of clients."¹

Though the concept of self-determination has been interpreted and defined in a wide variety of ways within social work literature, there is no doubt that its general message has become firmly entrenched in the profession's collective psyche. To deny this concept is to challenge the integrity of one of the most prominent and secure pillars upon which social work is built.

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Yet, for all the attention we have paid to this central concept, we have not given much recognition to a concept that is equally relevant to the professional activities of social workers: paternalism. At first glance it may appear that the difference between self-determination and paternalism in social work is merely linguistic, that these terms simply represent two faces of the same conceptual coin. Self-determination refers to the right clients have to pursue meaningful goals without interference, and paternalism entails interfering with this right. As I will seek to clarify, however, despite their close kinship, there are important, substantive differences between these concepts that have important implications for the practice of social work. My intention here is to distinguish the concept of paternalism from that of self-determination, discuss the relevance of paternalism to social work, and speculate about the extent to which paternalism is justified in the profession.

Self-Determination and Paternalism

The concept of self-determination in social work typically entails the right of clients to act in accord with, and chart a path in life that issues from, their own goals, desires, and wishes. As Felix Biestek asserted some years ago, "The principle of client self-determination is the practical recognition of the right and need of clients to freedom in making their own choices and decisions in the casework process. Caseworkers have a corresponding duty to respect that right, recognize that need, stimulate and help to activate that potential for self-direction by helping the client to see and use the available and appropriate resources of the community and of his own personality."²

The concept of self-determination is ordinarily specified further in either negative or positive terms. The negative sense of self-determination implies the client's right not to be coerced or interfered with and the absence of restraint. Thus, clients should not be expected to continue therapy or receive concrete services against their will. The positive sense of the term implies, conversely, possession of the knowledge, skill, and wherewithal to pursue one's goals. It is this sense of the concept that has, at least implicitly, served as justification for social work's long-standing promotion of clients' rights to public aid benefits, medical care, food subsidies, public housing, and so forth. That is, without access to these basic resources, clients would be hindered in their efforts to exercise positive (versus negative) freedom and their right to self-determination.³

Because paternalism generally implies acting in a manner that interferes with individuals' freedom of choice or actions, it also touches on issues related to the client's right to pursue self-selected goals and to noninterference. Yet the concept of paternalism incorporates a series of issues that are not ordinarily addressed in discussions of self-determination. Stated briefly, by way of introduction, there are two important distinctions between the concepts of self-determination and paternalism. First, paternalism, as I will establish in detail, implies that an individual's freedom of choice and/or actions are to be interfered with for that individual's own good. The principle of self-determination, or, more precisely, the denial of the right to self-determination, is not necessarily justified by reference to what is good for the individual who is to be interfered with. Denial of a person's right to self-determination may include reference to his or her own good, but it does not do so necessarily. For example, denial of a criminal's right to self-determination is routinely justified by claims that the rights of third parties (community residents) to safety and protection from harm override the offender's right to self-determination, or negative freedom. What is good for or in the interest of the criminal might not (and frequently does not) enter into our justification whatsoever.

This is not the case, however, when we behave paternalistically. Consider, for instance, a convicted criminal who is incarcerated in a prison and who has been invited by a pharmaceutical company to participate as a research subject in a study on the effects of a new drug. If we deny the inmate the opportunity to participate in the study on the grounds that prisoners are vulnerable to abuse and coercion because of tempting incentives to participate in research (such as money or an official commendation), we behave paternalistically. In this instance, we claim, the right of inmates to freedom is denied for their own good, not that of any third party. Whether such paternalism is justified is, of course, debatable. The important point is that paternalism does not entail any consideration of third parties, though self-determination (especially the denial of the right to it) may and frequently does. In this respect, then, the concept of paternalism is narrower than the concept of self-determination.

The second distinction between these two concepts is more subtle, though at least as compelling. The principle of self-determination, as it is ordinarily referred to in social work, is associated with the right of clients to behave as they wish and to pursue goals that are claimed to be personally meaningful. When we speak of denying clients their right to self-determination, we speak of interfering with goals or preferences that they have actively chosen and, either explicitly or implicitly, made the social worker aware of. In this regard, the client is proactive and the social worker is reactive. When the code of ethics of the National Association of Social Workers asserts that practitioners should

make every effort to foster "maximum self-determination," it suggests that the worker's principal responsibility is to follow the lead of clients and assist them in the pursuit of self-selected goals. The concept of paternalism, however, frequently involves just the reverse; that is, the social worker decides first what goals ought to be pursued, ostensibly for the client's own good. Paternalism frequently prevents clients from having the opportunity to formulate or announce their own goals in the first place. A peculiar feature of paternalism is that clients are often left in the dark or in some instances even misled about the options available to them or other relevant aspects of their lives. An example will make this clearer:

A man is in very critical condition as a result of injuries sustained in an automobile accident that killed his wife and one of his two children. He is receiving treatment in the intensive care unit of the local hospital. The social worker assigned to the ICU is concerned that news about his wife and child may seriously threaten his precarious condition and thus recommends to the attending physician that he be deceived for a short period of time.¹

Thus, the social worker does not intend to deny the man's right to self-determination in the sense that she will not help him to pursue self-selected and self-proclaimed goals. Rather, she has decided to recommend that he be kept in the dark from the very beginning, at least for some time. Though keeping clients in the dark, either through withholding information or providing misinformation, is not characteristic of all cases of paternalism, it is characteristic of a significant number.

A Closer Look at Paternalism

The concept of paternalism, though not the term itself, has been bandied about regularly since the time of Aristotle, who argued in his *Politics*—written in the 4th century B.C.—that some degree of paternalism is justifiable in a society in which certain elite individuals are clearly more informed and wiser than others. The classic commentary on paternalism, however, appeared in the nineteenth century in John Stuart Mill's essay *On Liberty*. Following the publication of this essay in 1859, Mill came to be regarded as the principal spokesman for antipaternalism, especially with respect to the excesses of government intervention. In *On Liberty*, Mill presents what has become the standard citation for antipaternalists: "[The] sole end for which mankind are warranted, individually or collectively, in interfering with the liberty

of action of any of their number, is self-protection. That the only purpose for which power can be rightfully exercised over any member of a civilized community, against his will, is to prevent harm to others. His own good, either physical or moral, is not a sufficient warrant. . . . Over himself, over his own body and mind, the individual is sovereign."⁵

The structure of Mill's argument is essentially as follows:

1. Since restraint is an evil, the burden of proof is on those who propose such restraint.
2. Since the conduct being considered is purely self-regarding, the normal appeal to the protection of the interests of others is not available.
3. Therefore, we have to consider whether reasons involving reference to the individual's own good, happiness, welfare, or interests are sufficient to overcome the burden of justification.
4. We either cannot advance the interests of the individual by compulsion, or the attempt to do so involves evils that outweigh the good done.
5. Hence, the promotion of the individual's own interests does not provide a sufficient warrant for the use of compulsion."

Since the publication of *On Liberty*, there has been considerable debate about the nature of paternalism and its justification. Concern with the problem of paternalism among contemporary philosophers was especially noteworthy during the 1960s, largely because of the widespread attention being paid then to issues of civil rights and liberties. Debate during those unsettling years about the rights of, for example, the mentally ill, prisoners, and children gave rise to considerable philosophical controversy concerning the limits of government intervention and the rights of citizens under the care of the state. Professional practices that previously had been unchallenged were called into question. Is it permissible to sterilize a mildly retarded female adolescent "for her own good"? Does she have the right to at least participate in the decision? Is it permissible to require a ward of the state to accept a blood transfusion, despite his protests? Do individuals committed to a state department of mental health have the right to the least restrictive alternative?⁷

It is no accident that what is widely regarded as the seminal contemporary essay in the philosophical literature on paternalism appeared in the midst of national controversy about civil liberties. In his 1968 essay, Gerald Dworkin, a moral philosopher, defined paternalism as "interference with a person's liberty of action justified by reasons referring exclusively to the welfare, good, happiness, needs, interests, or values of the person being coerced."⁸ For him, examples of paternalism include laws that justify civil commitment procedures on the basis of preventing the client from harming him- or herself, require members of certain religious sects to have compulsory blood transfusions, make suicide a criminal offense, require motorcyclists to wear safety helmets,

and forbid persons from swimming at a public beach when lifeguards are not on duty."

Dworkin's definition of paternalism is thus restricted primarily to interferences with the actions of individuals that, to use Mill's term, are self-regarding. Philosophical discussions of paternalism since Dworkin's original formulation have expanded this definition to include interference with individuals' access to information, emotional condition, and so forth, in addition to actions per se. In her prominent essay on the justification of paternalism, the philosopher Rosemary Carter defines a paternalistic act more broadly as "one in which the protection or promotion of a subject's welfare is the primary reason for attempted or successful coercive interference with an action *or state* of that person"¹⁰ In a more detailed definition, Allen Buchanan, a philosopher concerned with medical ethics, describes paternalism as "interference with a person's freedom of action or freedom of information, or the deliberate dissemination of misinformation, where the alleged justification of interference or misinforming is that it is for the good of the person who is interfered with or misinformed."¹¹ Though Carter's and Buchanan's definitions of paternalism are more comprehensive than Dworkin's, all contain the element of coercion or interference that is justified by references to the good of the individual who is being interfered with.

Forms of Paternalism in Social Work

Paternalism can thus take a variety of forms in the practice of social work. In general, there are three categories into which paternalistic actions can be placed: (1) interference with an individual's intentions or actions, (2) deliberate withholding of information, and (3) deliberate dissemination of misinformation. Interference with the intentions or actions of an individual can include, for instance, requiring that a client be hospitalized against his or her wishes, restraining a self-destructive client with force, or insisting that a client accept an offer of assistance or a particular service. Withholding information or providing misinformation can also occur under a variety of circumstances where it is believed that clients may harm themselves if they have access to truthful information. The following examples illustrate these general forms of paternalism.

1 *Interference with a client's intentions or actions.*—A young woman was referred to the city Department of Social Services by the police after being discovered living in the basement of a dilapidated, abandoned building. She appeared to be ill-fed and unkempt. Against her wishes,

she was transferred to a local shelter for housing, medical care, food, and counseling

2. *Deliberate withholding of information*—A man has been placed temporarily in a psychiatric facility because his wife reported he had been engaging in bizarre behavior. After considerable contact with him, his social worker at the institution concludes that his home environment—in particular his relationship with his wife—is a major source of strain. As a result, the social worker decides to postpone informing him about the institution's policy that permits some residents occasional home visits

3. *Deliberate dissemination of misinformation*.—A seven-year-old girl has been placed in temporary foster care after having been abandoned by her mother. Assuming she would be seriously harmed by news that she has been abandoned, her social worker decides to tell her that her mother had suddenly become ill and would not be able to care for her

These examples do not, of course, describe the entire range of possible paternalistic actions that social workers can engage in. Rather, they serve to illustrate some of the forms that paternalism in social work can take. Though there are significant differences among these examples, all have several features in common. In particular, the workers in all three cases assume (1) their actions are for the client's own good, (2) they are qualified to make judgments about what is in the client's best interests, and (3) protection of the client's welfare justifies interference with his or her intentions, actions, emotional state, or right to accurate information

Though my primary concern is with these instances of interpersonal paternalism, it is important to note that the profession of social work also contains numerous instances of institutional paternalism, such as requiring individuals to accept vouchers for items such as food or rent when cash benefits would be preferred, policies that prevent clients from participating in research studies because of possible abuses; laws that prevent individuals from receiving services from unlicensed practitioners because of potential harm; requiring individuals to spend a portion of their income on the purchase of future retirement benefits, and using case managers to select services for disabled people who would prefer to choose their own services. In each of these instances, a legislative or administrative body has judged that certain requirements must be made of individuals, or their freedom interfered with, to protect them from harm.

As one would expect, instances of interpersonal and institutional paternalism have generated substantial debate and controversy within social work. On one side are those who claim that circumstances can arise when people, particularly those who are poor, ill, without formal education, or otherwise vulnerable, need to be protected from injury

that may be caused by their own self-destructive behavior or the malevolent actions of others. Critics, on the other hand, argue that individuals have the right to pursue their goals without interference and even to make mistakes (or as David Sayer has put it, "the right to fail").¹² The central question thus concerns the problem of justification, and the criteria that must be met to defend an act of paternalism.

The Justification of Paternalism

Debates about the justification of paternalism ultimately reduce to debates about conflicts among various rights and duties. Paternalism essentially entails a conflict between the right of clients to well-being and their right to freedom from interference or coercion. There are also corresponding conflicts among the social worker's simultaneous duties to protect the client from injury or harm, promote maximum self-determination on the part of the client, and avoid gratuitous intervention in clients' lives. We thus face a situation where several *prima facie* duties and rights conflict—that is, duties and rights that, considered independent of one another, are justifiable but cannot be fulfilled simultaneously.

Despite the overwhelming bias against paternalism in both contemporary philosophy and social work, there is widespread agreement that circumstances can arise periodically that call for interference in individuals' lives against their wishes. Assuming this to be true, social workers must develop a set of criteria to guide decisions about paternalism and to identify those circumstances where it appears to be warranted. The following criteria are designed to serve such a function. They fall generally into two categories: (1) attributes of clients, and (2) attributes of the situation in which clients find themselves.

Attributes of the Client

Although it is generally agreed that social workers should ordinarily avoid paternalistic actions, paternalism may be justified in a relatively narrow range of circumstances when one or more of the following conditions prevail.

1. *Clients lack information that, if available, would lead them to consent to interference.*—If we observed an individual about to dive head first into shallow water, and if we did not have time to warn him of the danger, we would certainly be justified in interfering with his freedom, at least temporarily. It is quite likely that the individual would subsequently approve of our action once it has been explained.

Similarly, if a distraught client threatens to ingest a large number of sleeping pills in order to commit suicide, under the mistaken impression that her spouse has just recently been killed, paternalism would be justified. It is reasonable to assume that the client would attempt to commit suicide if she were aware of accurate information and would therefore approve of our interference. It is possible, of course, that our assumptions are not correct, but this is a risk we would be justified in taking.

2. *Clients are incapable of comprehending relevant information, either temporarily or permanently* — The central issue here is competence, in particular of children and those who are mentally ill. With respect to children, it is clear that circumstances at times justify interference because of their lack of knowledge and maturity. Even Mill acknowledges this form of justifiable paternalism when he argued, "Those who still in a state to require being taken care of by others, must be protected against their own actions as well as against external injury."¹³ Recognizing that an age of majority fixes only an arbitrary boundary between maturity and immaturity, few would deny that paternalism is frequently justified in our relationships with children. The proper extent of paternalism, however, is debatable.¹⁴

Cases involving those who are mentally impaired are more complex. There is considerable controversy about what constitutes mental incompetence, and this has led to wide-ranging debate about paternalism and its justification in dealings with the mentally ill. There is no doubt a problem in extreme cases involving those who are clinically psychotic or severely retarded, but even here serious disagreements arise about such matters as the allegedly paternalistic use of psychotropic drugs, shock treatment, and so on. The greatest debates, however, concern marginal cases, such as those involving the mildly retarded. To what extent should such marginal individuals have the right to chart the course of their own lives and make decisions about marriage, procreation, and so forth? On one side of the debate, of course, are those who argue that these individuals must be protected from placing themselves in circumstances that are likely to lead to harmful consequences. On the other side are those who argue that the line distinguishing the mentally impaired from "normal" individuals is fuzzy and mobile—and, hence, to some extent arbitrary—and that those who are in some way retarded or disturbed should not necessarily be prohibited from enjoying the rights exercised by ordinary citizens. Daniel Wikler, for example, a philosopher concerned with the rights of the retarded, has argued that professionals' judgments about restrictions that ought to be imposed on the mentally impaired have been grossly inconsistent. "The question which remains . . . is whether the restrictions are defensible for those who are in fact retarded and who do seem likely to encounter trouble if granted full citizenship. I

right to take risks is to be denied the retarded by normal persons on the basis of the latter's intellectual superiority, one would think it legitimate for exceptionally gifted persons to do the same to normal persons. The right to self-direction claimed by normal persons, however, seems to be a claim of immunity against the paternalistic interventions even of those who are more gifted."¹⁶

3. *Clients consent to the paternalistic intervention prior to the interference* — The condition of prior consent is ordinarily sufficient to justify what would otherwise be considered paternalistic interference. For example, a client who is voluntarily admitted to an alcoholism treatment center may agree on admission that during his stay staff may interfere with any attempt he might make to consume alcohol, regardless of any special pleading he may engage in. The client may resent such interference at the time it is introduced, but his prior consent, assuming that it was given freely and that the client was fully informed of its implications, would permit this form of coercion. In essence, the client has agreed in advance to outside interference because of his fear of his inability to resist future temptation (or because he may fear penalties that might be imposed if he refuses to consent). Such prior consent technically results in the client's forfeiture of his right to noninterference, or what Carter calls the "alienation of the right."¹⁷

This condition of prior consent is frequently referred to in the philosophical literature as a "Ulysses contract," following the passage in the epic poem, the *Odyssey*, where Ulysses (or Odysseus) orders his men to tie him to the mast and refuse all future commands to free him because he knows the power of the Sirens to enchant men with their songs. The crew's refusal to obey Ulysses's subsequent wishes was justified by his prior consent. Dilemmas arise, of course, when individuals subsequently change their minds. Should the change of heart be respected, or should the original contract be upheld? An extreme, though not uncommon, point of view is that one's prior consent overrides any subsequent revision. According to Dworkin, for example, an individual may "claim to have changed his mind but since it is *just* such changes that he wished to guard against we are entitled to ignore them."¹⁸

One of the difficulties with the condition of prior consent, however, is the widespread disagreement about what constitutes free and informed consent. Several important issues arise here. First, the criterion of voluntariness is ambiguous, especially given the subtle pressures often present in social work settings. Clients who otherwise would be inclined to refuse consent may provide it "voluntarily" because of apprehension about the consequences of failing to do so—for example, withdrawal of service, discharge, personal rejection.¹⁹ Second, it is hard to establish how much information must be provided to meet the standard of informed consent. Is it permissible to provide clients with only limited

details about future interference (for their own good perhaps); literate must clients be to grasp fully whatever information is transcribed to them? Finally, must the consent be explicit, or is tacit or implied consent sufficient? There is a considerable difference, for example, between a situation where a client explicitly consents to a specific type of future interference and one where a client is asked to sign a general consent form that gives permission for staff to provide "whatever treatment is deemed appropriate to the client's reported problem."

4. *Clients are likely to consent to the paternalistic intervention subsequent to the interference.*—This is a particularly complex condition, though one that, if met, can occasionally justify paternalism. In one important respect, this condition is correlated with the first presented condition concerning a client's lack of information. That is, paternalism is justified if, subsequent to the interference, the client is disposed to consent on the receipt of relevant information. The difficulty, of course, is involved in obtaining agreement on criteria concerning the likelihood of subsequent consent. Recognizing that such agreement may be difficult to obtain, but also recognizing that social workers must nevertheless make hard decisions about paternalistic actions, the following conditions represent a guide to the considerations that ought to influence the predictions of the likelihood of obtaining subsequent consent.

First, is the paternalistic action consistent with the permanent goals and preferences of the client? Permanent goals and preferences related to a person's life plan, including sustenance of a family, or pursuit of a career, basic physical and mental health, and shelter, and the absence of prior consent, interference may be justified to safeguard these goals and preferences expressed by the client. We cannot assume, of course, that an individual's permanent goals and preferences can be identified easily. In some instances, clients will have been somewhat vague about their wishes and plans. In some extreme cases, it may be necessary to rely on a surrogate or personal representative, as in instances when a client is unconscious or otherwise disabled. In general, however, whatever knowledge is available about a client's life plans should be taken into account when judgments need to be made about the likelihood of subsequent consent.

Second, is the client in a temporary state of incompetence? This would include instances when an individual's judgment is temporarily impaired—for example, when in a state of crisis because of bad news or physical illness. It is reasonable to assume that people who emerge from acute crises often act in ways they later regret and would subsequently approve of paternalistic interference with self-destructive behavior. A similar rationale is used to justify interference with child abuse. Dworkin has made the following observation about justifiable paternalism in instances when individuals are faced with acute, immediate pressure, such as when individuals contemplate suicide: "[It] is re-

able . . . to agree to some kind of enforced waiting period. Since we are all aware of the possibility of temporary states, such as great fear or depression, that are inimical to the making of well-informed and rational decisions, it would be prudent for all of us if there were some kind of institutional arrangement whereby we were restrained from making a decision which is so irreversible."²¹

Third, does the client lack relevant information that he or she will, in the normal course of events, come to possess? The relevance of this consideration has been discussed. It may be permissible to interfere, at least temporarily, with a client who is simply unaware of the danger involved in ingesting certain drugs or failing to take appropriate medication regularly. Of course, there need to be strict limits placed on such interference, as I will discuss more fully below.

Fourth, is there a favorable ratio of benefits to costs for the client? In general, it is reasonable to assert that the higher the ratio of potential benefits to costs, the greater the likelihood that the interference will meet with the client's subsequent consent. We must acknowledge, however, the relatively primitive nature of our ability to measure precisely such costs and benefits.

Finally, do certain conventions exist? This is a rather abstract guideline having to do with prevailing norms related to the client's treatment. For example, a client who is a resident of a drug rehabilitation center may be a member of a community whose norms or conventions permit other members to interfere or impose restraints on anyone engaging in self-destructive behavior. This condition is related, then, to the concept of tacit or implied consent discussed above, though consent to such interference could also be given explicitly.²²

Attributes of the Client's Situation

The attributes I have reviewed thus far pertain to clients themselves—their competence, prior consent, and subsequent consent. However, there is also a related series of attributes related more closely to the situations in which clients find themselves that, if present, may justify paternalism.

1 *The harmful consequences that are likely without interference are irreversible.*—Many of the decisions we make in life produce consequences that are impossible to reverse. On the face of it, it is reasonable to give greater weight to arguments in favor of paternalism when the action to be interfered with would otherwise result in an irreversible outcome, as opposed to actions whose results could be reversed. For example, a client who has decided, against her counselor's advice, to move back in with her estranged husband is engaging in an action whose outcome, if harmful, can be reversed, at least in principle; the client can once again move out of the home. Similarly, the elderly, disabled client who chooses to remain at home rather than accompany

her children on family outings—contrary to her caseworker's advice can subsequently change her mind. However, the client who plans injure himself permanently, if successful in his effort, would not have the opportunity to reverse the outcome. Paternalism, at least in the form of temporary interference, would therefore be justifiable in this case.

2. *A wider range of freedom for the client can be preserved only by restricting it temporarily*—There is considerable debate within the social work profession about the extent to which individual clients ought to be permitted to engage in self-destructive behavior that will ultimately limit their own freedom.²³ Remaining in pathological relationships, abusing drugs or alcohol, and—in the extreme case—committing suicide are examples of such behavior. Assuming that we generally ought to avoid interfering in individuals' actions that are self-regarding, it is important to clarify whether anything more than temporary interference—to establish whether the individual is making a free and informed choice—is ever justifiable in these situations.

Though in recent years there has been a bias against paternalism among both philosophers and professionals in general, there is a considerable recognition that in rare instances a client's freedom of action needs to be interfered with to preserve a wider range of freedom. Even Mill, for example, the ardent antipaternalist, conceded that paternalism is justifiable when individuals choose to forfeit the bulk of their freedom, such as by selling oneself into slavery voluntarily. "The principle of freedom," Mill writes, "cannot require that he should be free not to be free. It is not freedom to be allowed to alienate freedom."²⁴ John Rawls has taken a similar position in the formulation of his principles of justice in *A Theory of Justice*, where he argues "Liberty can be restricted only for the sake of liberty."²⁵

It is indeed difficult to know when an individual's liberty can be justifiably interfered with, but, as we have seen, circumstances can arise that call for at least a temporary restriction of freedom to permit a greater degree of freedom in the future. Strict limits must, however, be placed on such interference so that it does not become gratuitous. In general, we should be tolerant of individuals' decisions about themselves as long as several conditions have been met. First, noninterference can be justified when it is clear that the individual's actions would not endanger others. Harm to others can take several forms, including physical harm that may result from the loss of control often associated with the use of alcohol or drugs, for example, or harm that would be inflicted on dependents who rely on the individual for economic or other support. Thus, if the prospective self-destructive behavior would be incapacitating or fatal and would therefore deprive others of essential support, paternalistic interference may be justified. Second, noninterference can be justified when it is clear that individuals have made their choice voluntarily. If an individual's choice has been coerced,

a result of either external threats issued by a third party or by some internal cognitive or emotional disturbance, temporary interference, at the very least, would be warranted. Though it may appear that any inclination to engage in self-destructive behavior is itself evidence of deep emotional trauma or disturbance, it would be difficult to prove that this is necessarily so in all cases.²⁶

3 *The immediate need to rescue overrides prohibitions against interference.*—In chapter 5 of *On Liberty*, Mill considers the following set of circumstances. Someone is about to cross a bridge that we know will collapse under his weight. Since there is no time to warn him, we seize him and turn him away. According to Mill, our action is “without any real infringement on his liberty, for liberty consists in doing what one desires, and he does not desire to fall into the river.”²⁷ Mill’s point, of course, is that the need to rescue someone who apparently does not wish to be harmed is not paternalistic or an infringement of freedom.

There certainly are analogous situations in social work where our apparent need to aid individuals in dire straits seems more compelling than our responsibility to avoid interfering in clients’ lives. However, even conceding that such forms of rescue may be justifiable on occasion, Mill is quick to caution, “Nevertheless, when there is not a certainty, but only a danger of mischief, no one but the person himself can judge of the sufficiency of the motive which may prompt him to incur the risk: in this case, therefore (unless he is a child, or delirious, or in some state of excitement or absorption incompatible with the full use of the reflecting faculty), he ought, I conceive, to be only warned of the danger, not forcibly prevented from exposing himself to it.”²⁸

These various criteria pertaining to the attributes of clients and to the attributes of the situations in which clients find themselves provide a guide for distinguishing in a general way between when paternalistic actions are warranted and when they are not. One of the difficulties with guidelines presented in this form, however, is that, although they help to orient practitioners to the considerations that ought to enter into their deliberations about paternalism in social work, they fall short of providing precise formulas for determining when paternalism is justified in professional practice. But, after all, no aspect of social work can be performed by relying on the equivalent of mathematical equations. The nature of social work is such that, in the end, one must rely on human judgment and discretion. Guidelines can serve as a useful goad and can help to shape our approach to problems, but they cannot produce unequivocal solutions to which all practitioners will assent.

Conclusion

The inclination to assist people who experience problems in living is what tends to draw us to the profession of social work. However,

because of our abiding interest in helping, we must be attentive to any tendency to become excessively intrusive of our clients. Paternalism in social work is not always inappropriate. At times it is even obligatory. Paternalism becomes a problem when the attributes of our clients and the situations in which they themselves do not strictly demand actions that may be in their best interests but run counter to their wishes. The assertion that we know best for others may in some rare instances be true. Too often it is presumptuous.

We must be especially careful to justify paternalistic acts in the case with which this concept can be misused to exercise social control. The term "paternalism"—which implies that one is motivated by an altruistic interest in a client's welfare and has been used as camouflage for actions that in fact are motivated by individual or organizational self-interest. Unfortunately, clients need to be restrained, deceived, or administered in their own good are sometimes little more than rhetoric to justify actions that are ultimately designed to keep order in an organization and its method of operation. Because of this, the term "pseudopaternalism," it is important to recognize that the burden that must be met to justify paternalistic acts are stringent and the burden rests primarily with the potential paternalist.²⁹

The burden of proof in cases of paternalism entails two elements—what are referred to in legal circles as the "burden of proof" and the "burden of persuasion." The "burden of proof" implies that it is up to the individual in authority to broach the issue of paternalism and present evidence concerning the harmful consequences that the interference will presumably prevent. The responsibility does not rest with clients to present a case demonstrating that their behavior is not or will not be harmful. The "burden of persuasion" implies that the evidence presented by the individual in authority must be compelling.³⁰

The problem of paternalism in social work (and elsewhere) is down to a muddy conflict between clients' right to autonomy (referred to as negative freedom) and to assistance that will enhance their welfare and enhance their ability to pursue meaning in the future (positive freedom). Asking practitioners to locate the fine line that separates the concepts of autonomy and paternalism is asking a lot, yet it is a demand that must be made.³¹ After all, we do not seek to understand the complex relationship between autonomy and well-being and the measures that are needed to enhance it. We have lost the lifeblood of our profession. If we err in the direction of too much intrusion, we risk alienating our clients and compromising the mission. If we err in the direction of leaving too much to clients, we risk nothing less than neglect and the sins of omission.

Notes

- 1 National Association of Social Workers, *Code of Ethics*, rev. ed. (Washington, D.C.: National Association of Social Workers, 1980).
- 2 Felix P. Bieschke, "Client Self-Determination," in *Self-Determination in Social Work*, ed. F. E. McDermott (London: Routledge & Kegan Paul, 1975), p. 19.
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The Orphan Asylum in the Nineteenth Century

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The nineteenth-century evolution of the Protestant Orphan Asylum in St. Louis, Missouri, is described in this paper. Keeping in mind various theories of the development of institutions for children during the nineteenth century, we examine data on families of children admitted, length of stay of children, and reasons for leaving the institution. The data support a new interpretation that explains the evidence more thoroughly than the previously accepted theories. The evidence suggests that the asylum's development reflected, above all else, the special need of families in transition.

From its founding in 1834 throughout the nineteenth century, St. Louis Protestant Orphan Asylum (POA) received children in need of shelter and protection. The records of the POA reflect the waves of immigration, war, disease, and growing urbanization that characterized St. Louis during this period. "Our Asylum is open to all," the governing board said. "It is the united effort of Christian Protestants in behalf of the destitute."¹ With its interdenominational status, the POA attracted contributions from a broad range of wealthy and middle-class St. Louis residents. It became a well-established, well-endowed charity, and was supported generously by the volunteer service of women in the community. The policies and program decisions made by the POA represented the views of many elements of society regarding care of dependent children, and the children came from a wide variety of social and religious backgrounds.

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This comprehensiveness makes the records of the POA particularly useful in understanding the function of children's institutions in the nineteenth century. It is the purpose of this article to describe the role of the POA in the St. Louis community and to weigh this evidence against various theories that have been advanced to explain the increase in children's institutions during this time.

The St. Louis POA was one of many institutions for dependent children founded during the nineteenth century. Between 1830 and 1850 alone, private charitable groups established fifty-six children's institutions in the United States.² The population of young people in orphanages increased from about 200 in 1790 to about 123,000 in 1910. Additional dependent children were in almshouses (see table 1)

Various theories have been formulated to explain the expansion of institutional care during the nineteenth century. One theory is that institutions were viewed as an advance over colonial forms of relief for the poor. In the case of children, increased knowledge about the special needs of children led well-intentioned people to create institutions especially for the young, away from adult criminals and deviants.³

Another view is that the motive in creating institutions was the desire of the wealthy classes to exercise control over the poor. Institutions represented a threat to poor workers—if they were unwilling to work at demeaning and ill-paid jobs, they would be sent to the poorhouse. Applied to children, this perspective suggests that the punitive conditions and isolation from family made possible by institutionalization would coerce dependent children into obedient labor market behavior.⁴

Table 1

INSTITUTIONALIZED DEPENDENT CHILDREN IN THE UNITED STATES, 1790–1910

	Almshouses	Orphanages	Total	Rate*
1790	1,000	200	1,200	62
1820	3,000	1,500	4,500	94
1850	17,000	7,700	24,700	196
1880	11,500	60,000	71,500	281
1910	3,600	123,000	126,600	313

SOURCES—Michael W. Sherraden, "Institutionalization of Children and Youth in the United States, Colonial Times to 1970" (research in progress, Washington University, St. Louis). Data on dependent children in nineteenth-century institutions are discussed in Michael W. Sherraden, "Abuse and Neglect of Children in Institutions: The Nineteenth Century" (paper presented at the Missouri Valley History Conference, Omaha, March 1980).

NOTE—The numbers shown here are single-day institutional population estimates for children under twenty-one years old, derived from institutional records, reports of the U.S. Bureau of the Census, and other sources.

* The rate of institutionalization is the number of children under twenty-one years old institutionalized per thousand under twenty-one in the general population.

David Rothman has advanced still another explanation for the rise of institutions. According to Rothman, institutions represent an effort to insure the cohesion of the community in new and changing circumstances.⁵ In a country that was changing from a colonial to a modern industrial state, institutions were considered to be predictable, and stable. From this perspective, the functions of child institutions were to train and rehabilitate young people and provide a model for the moral reform of society. Through disorderedly routine, and complete separation from the external environment, children could shed vicious and unwholesome habits. Children abandoned to the vices of idleness, intemperance, begging, vagrancy, and prostitution were offered protection and discipline that strengthen their characters.

Each of the above theories places great importance on institutional life per se, each assumes that the establishment of a controlled environment was the primary reason that institutions were built. Whether institutions were viewed as benevolent, punitive, therapeutic, protective, or corrective, the rationale for creating them was that only in institutions could the necessary regimen be established. The desired program in a controlled environment could not take place outside, in everyday society.

A different view of the expansion of institutional care of children has been offered by Michael Sherraden. In an empirical study of numbers of children in various types of institutions, Sherraden concluded that labor market conditions played a significant role in the growth of institutional care during the nineteenth century. In the preindustrial period, almost all young people worked. But industrialization and mechanization eventually reduced the relative demand for unskilled child labor. Simultaneously, vast numbers of young people were entering the country as immigrants. The net effect of these changes was to create an oversupply of child labor. Society was then faced with the problem of what to do with all of these young people—how to support them, how to socialize them, and how to control them? Institutions were the answer. Compulsory education was another part of the solution. Moreover, it was this diminishing demand for child labor that laid the groundwork for the "humanitarian" movement opposing child labor in the late nineteenth and early twentieth centuries. Thus, from a labor perspective, institutions were created to house children who were not needed in the labor force. Sherraden's evidence in support of this interpretation is: (1) the rate of institutionalization of young people in all types of institutions increased from less than one per thousand in 1790 to more than five per thousand in 1910, (2) length of stay and average age of children in institutions increased as the nineteenth century progressed; and (3) the average age of indenture increased as the century progressed, which meant that more children stayed in institutions.

institutions for longer periods. The latter was a result of changing demand for child labor. Institutions became a substitute for the age-old indenture system.⁶

The records of the POA contain evidence supporting each of the above explanations for the increase in numbers of children's institutions. But these records, particularly those of the circumstances surrounding the children's entry into the asylum, their length of stay, and their reasons for leaving the institution, suggest another explanation as well. They suggest that the development of the POA can be understood as a response to the social and economic problems of transiency. Traditional urban poverty played a part in creating candidates for admission, but the users were not simply the poor—they were the poor in motion. Children of boatmen, soldiers, drifters, pioneers, forty-niners, and immigrants found temporary refuge at the POA. The child welfare problems of their families were related to their transient condition as much as to poverty. They had neither friends nor families to fall back on in times of stress, and the hazards of the frontier created especially stressful conditions. For children of these families, the POA did not provide a permanent alternative to instability, but rather a temporary refuge or an opportunity for a change of direction.

It has been previously documented that nineteenth-century children's institutions housed a disproportionate number of immigrant children and children with foreign-born parents.⁷ Many of these children were from families in transition. This study presents evidence suggesting that it was the needs of these transient families that often made institutionalization desirable, and that institutional programs developed largely in response to such needs.

The nineteenth-century history of the POA falls into three periods: the early years, from 1834 to 1846; the middle years, from 1847 through 1869, and the later years, from 1870 to 1900. Each of these periods is discussed in turn, emphasizing characteristics of children served by the asylum and changes in goals, philosophies, and programs. Changes within the institution are also related to social and economic developments in the St. Louis community.

1830 to 1846

In 1834, when the Protestant Orphan Asylum was founded, St. Louis was in a period of rapid growth. Between 1825 and 1830 the population doubled in size, reaching 6,000 in 1830. During this time, the city was

transformed from a trading town to a booming commercial capital. Public services, however, did not keep pace with economic growth. By 1830 most city streets were paved, but the city still had no regular police force, fire protection, public health facilities, or comprehensive water supply system. St. Louis's educational foundation was among the weakest of all western cities.⁸

Until 1855, when the city established a House of Refuge, there was no publicly financed institution for children in St. Louis. Nor was there an almshouse. Dependent children came under the provision of the poor law, which authorized local courts to indenture them to families. Boys were bound to masters until the age of twenty-one, girls until the age of sixteen. Masters were supposed to teach apprentices basic literacy and a vocation, and to give them a Bible and two suits of clothes upon emancipation.⁹ As the century progressed, private institutions began to supplement the indenture system. The first children's institution in St. Louis, a Catholic orphanage, was established in 1827. The POA was second, and twenty-four more were established during the century.¹⁰

Most of the newcomers to the city, who swelled its population during the 1820s and 1830s, were members of two economic groups—wage earners and transients.¹¹ Transients—boatmen, migrant laborers, and drifters—were the most marginal members of the community, and became even more so as commerce grew and the town became more settled. Soldiers stationed at nearby Jefferson Barracks, the largest military fort in the country, and other soldiers in forts up and down the Mississippi River contributed to making the transient group larger than in other western cities.¹² The transient population, because it had fewer resources to cope with poverty, disease, alcoholism, and desertion, produced a disproportionately large number of dependent children.

The leaders of the Ladies' Association for the Relief of Orphan Children, which founded the POA, were women of the wealthy commercial and professional families of St. Louis. The husbands of early association members included the president of the Bank of the State of Missouri, the president of the Missouri Insurance Company, an officer of the American Fur Company, a wealthy hardware store owner, and several steamboat captains and owners.¹³

During the early years, however, the asylum's support was not limited to the wealthiest elements in St. Louis society. In its fund-raising drives, the asylum made a wide appeal to the community. About 150 people contributed annually in membership subscriptions during the first six years. The association also relied on donations from businesses and private individuals through door-to-door solicitations.¹⁴ Some of these in-kind donations were quite humble, suggesting that people of very limited means were able to contribute. Donations during the second

year, for example, included shoes, combs, handkerchiefs, sheets, a washtub, stools, clothing, a carload of hay, a bushel of meal, and half a pig.¹⁵

The Ladies' Association developed out of the congregations of the Episcopal, Methodist, Presbyterian, and Unitarian churches. Ministers of these churches were instrumental in founding the association. For the first fifteen years, the asylum relied heavily on contributions from church fund-raising drives for its financial support. These contributions comprised about 30 percent of the budget during the early years, and were another channel through which less wealthy citizens could donate.¹⁶

By December of 1835, the Ladies' Association had purchased a lot on the outskirts of the city, built a house, hired a matron, and began to receive children. Responsibility for running the institution and authority to make decisions was vested by the association in a board of managers, a group of sixteen women who were members of the association and had the leisure and competence to undertake extensive volunteer responsibilities. This board, with occasional changes in membership, continued to run the institution throughout the century.

From the beginning, the asylum saw its function as offering protection and shelter to any child whose situation appeared desperate. The majority of children were not orphans; they were motherless and fatherless only in the sense that they were without sufficient care and attention. The managers justified taking all children in need, and not simply orphans, by their belief that urban slums were inimical to healthy growth "By taking the children away from these contaminating scenes of depravity we, in a measure, check its growth and remove these tender plants to a more genial soil, where they may acquire strength to bloom forever"¹⁷

The managers identified poverty, incapacitating illness of a parent, death of a parent, and intemperance as causes of child dependency. They were appalled at the misery they saw around them in the newly forming urban slums. "In our own city, in our own neighborhood, the wretchedness which prevails is known only to the few," they told their supporters. "Intemperance, that bane to all moral and social good, inflicts upon the child the miseries of the parent, and thus too often are the managers called upon to open their doors to the deserted little wanderer, whose pitiable situation admits of no denial"¹⁸

The vulnerable position of mothers left widowed with young children to raise was also recognized as requiring the charity of the community. With no pensions or private funds, and very few opportunities to make a living wage, widowed mothers were susceptible to exhaustion in a desperate struggle to take care of their children and simultaneously earn money for the children's support. The managers repeatedly presented vivid pictures of the sufferings of these women to the supporters and potential contributors of the asylum.

During this time, the institution population was small, with only twenty children at a given time. Some stayed briefly and then returned to their families, others were placed out informally with farmers, craftsmen, and tradesmen.¹⁹ Evidence suggests that during this period the asylum functioned in a way that was more formal but essentially similar to—the informal mutual helping that normally have occurred between neighbors or members of the congregation. The children were usually from families new to the area or just passing through, and they were not far removed socially from many of the people supporting the asylum. While the wealthy have been motivated by a sense of noblesse oblige, others involved with the institution were middle- and lower-middle-class citizens—the children of similar families that had fallen on hard times. This homogeneity was short lived, however. During the 1840s and as immigration increased, the social distance between the helped and those in need of help widened considerably.

1847 to 1869

In 1847 a large addition to the building of the POA was completed. As a result, the numbers of children received each year increased. For example, from sixteen in 1843 to forty in 1847.²⁰ The new wing was necessary because, by the mid-1840s, the POA found itself burdened with children left homeless as a result of immigration. By 1850 Massachusetts was experiencing a great influx of immigrants; it has been estimated that at the time of the 1850 census the state's population was 10 percent greater than it would have been without the net effect of interstate and foreign migration.²¹

Immigrants were moving into the state in search of land and economic opportunities. They were "exposed to the trials incident to pioneer settlements; they emigrate to a soil uncongenial to their former habits, and after struggling under an accumulated weight of labor and disappointment, soon sink into an early grave, leaving the little natives of the state to plead for an entrance into the orphan's home."²² For example, a twelve-year-old boy who entered the orphanage "came to the city on a steamer on which he had concealed himself while it was stopping to wait for cargo. He stated that his parents were dead, that he had been living with a step-father somewhere down the river, where or in what state he could not tell. He had been treated so unkindly he ran away."²⁴

In addition to those moving to the state as residents, a large number of people were moving through the state on their way elsewhere.

Orleans was a port of entry for foreign immigrants, and many came up the Mississippi on steamboats and passed through St. Louis. Migration west was also intense at mid-century. Pioneers and forty-niners added to the numbers of transients in St. Louis.

The managers recognized that the position of St. Louis as a transportation center increased the number of dependent children, and that St. Louis charities had a special responsibility to help both foreign and native-born transients. "Various circumstances combine to render it peculiarly the duty of this community to provide an asylum for destitute children," they told the association. "The numerous accidents that are constantly occurring on our Western waters, cause many a hapless child to mourn its first entrance into a land of strangers, bereft not only of parental protection, but of all the means which could enable it to procure a home."²¹

Some children had families, but they were so scattered that the children were essentially homeless. Two such children were left by their father with a St. Louis family for over a year, and finally the foster family placed them at the institution. The father had sent money for a few months, but was now thought to be dead in New Orleans. The mother had died in England.²⁵

Some children found the strains of immigration so overwhelming that they lost their ability to cope. The records of the asylum describe a Swiss family of six children whose parents had died of cholera on the steamboat from New Orleans. Two of the children died of the disease at the asylum. Two others also died, according to the records, "without any apparent disease—they gradually wasted away from the time of their first entrance into the Asylum—they seemed not to take interest in the amusements common to children, neither looked nor answered when spoken to, nor talked with each other. The doctor is of opinion that they have died of the malady familiar to the Swiss called home sickness."²⁶

The cholera epidemics of 1849 and 1850 claimed many parents of small children. In 1849, the asylum admitted eighty-three—twice the number of admissions of any previous year—and in 1850 it admitted 122. In 1851 the epidemic was over, and only thirty were admitted. Twenty-one children died at the asylum when the epidemic was at its peak.²⁷

An important function of the POA was to provide temporary refuge to migrating families in times of crisis. For example, two young children were brought to the asylum whose mother, "on her way to Independence, was detained by the ice, became sick and out of funds." The children were taken in "until relieved by their friends." The father was "said to be in California."²⁸

The Civil War also uprooted children. Single fathers in both the Union and Southern Armies placed children in the asylum, as did

soldiers' widows. In addition, as the fighting grew intense in the area around Missouri, the POA received bands of refugees, fleeing from battles. Three siblings arrived at the asylum in 1864, after heavy fighting in Arkansas. They had left with their father and mother, who "were compelled to flee from the State of Arkansas and died at St. Louis from disease contracted by previous want and exposure."²⁹

During these years, the Protestant Orphan Asylum responded to the upheavals caused by migration, epidemics, and war, as well as to the more predictable problems associated with growing urban areas. In response to the large numbers of children needing protection, the founders of the asylum stretched their concept of appropriate recipient of charity. At the outset, the asylum accepted orphaned children and those with parents who were ill or intemperate. By the mid-1860s however, the POA had received delinquents, war refugees, runaways, abused children, and those needing only a temporary stopping place while their families overcame a crisis. Steamboat captains dropped off children whose parents had died en route. Neighbors brought children whose parents had deserted them or died. Some children simply appeared at the door. Nearly all had originally come from somewhere else, and their families were now dead or fragmented.

The records of children admitted to the institution during the period from 1847 to 1865 indicate that the average age of children at the time of admission was six years. Generally these were children too young to be apprenticed. Only about 8 percent of the children whose ages were recorded were eleven years of age or older.³⁰ Older children were able to work and could survive outside the protection of the asylum.

During this period, only 27 percent of the children were full orphans (table 2). Sixty-nine percent of the children had one parent, the other parent being deceased or absent. The single parents were about equally divided between fathers and mothers. Four percent of the children had two parents. The nationality of these families was not consistently recorded, but from the evidence of last names and other information it is clear that the German, English, and Swiss were the most frequently represented immigrant groups.

Eighty-six percent of the children in the POA stayed less than a year (table 2). Clearly, most children did not remain at the institution for very long, and very few actually grew up there. Where did they go?

Fifty-one percent left the asylum to return to family or friends (table 2). This high percentage was, in large part, a consequence of the asylum's policy of taking children with living parents. Parents who left their children at the institution were expected either to pay board or to relinquish their children to the association so they could be placed out on indenture. This policy, which was included in the terms of the charter the association received from the state legislature in 1841,³¹

Table 2

CHARACTERISTICS OF CHILDREN IN THE ST. LOUIS PROTESTANT ORPHAN ASYLUM

	Children Admitted 1847-65 (N = 317)	Children Admitted 1871-96 (N = 135)	χ^2
Parental status			
No parents	69 (27%)	22 (5%)	$\chi^2 = 61.40$, $P < .001$
One parent	172 (69%)	340 (87%)	
Two parents	10 (4%)	30 (8%)	
Subtotal	251(100%)	392(100%)	
Parental status unknown	66	43	
Length of stay			
1 year or less	173 (86%)	214 (63%)	$\chi^2 = 34.53$, $P < .001$
1-3 years	18 (9%)	66 (20%)	
3-5 years	4 (2%)	41 (12%)	
Over 5 years	6 (3%)	16 (5%)	
Subtotal	201(100%)	337(100%)	
Length of stay unknown	116	98	
Reason for leaving			
Return to relatives or friends	128 (51%)	309 (82%)	$\chi^2 = 127.04$, $P < .001$
Indenture	80 (32%)	10 (3%)	
Adopted	8 (3%)	6 (2%)	
Died	32 (13%)	26 (7%)	
Other	3 (1%)	24 (6%)	
Subtotal	251(100%)	375(100%)	
Reason for leaving unknown	66	60	

SOURCES — The 1847-65 figures were obtained from the most complete record book of admissions of the POA during this period, entitled "Children in Asylum, 1847-1855-1865." A 40 percent random sample was obtained by sampling all children with last names beginning with A through H. This record book is located at Edgewood Children's Center, Webster Groves, Missouri. The 1871-96 figures were obtained from three record books of admissions to the POA during this period. A 24 percent random sample was obtained by sampling all children admitted during the years 1871, 1876, 1881, 1886, 1891, and 1896. The data for these years are based on the work of Isabel Ruth Johnsmeyer, "A History of the St. Louis Protestant Orphan's Home, 1871-1900" master's thesis, Washington University, St. Louis, 1943), p. 63.

NOTE — Numbers in parentheses are percents.

was designed both to prevent parents from abdicating responsibility for their children and to increase the institution's revenue. The association was concerned that simply taking children off parents' hands could "encourage idleness, intemperance and infamy."³² This policy was not always clearly understood or accepted by parents. Parents sometimes relinquished their children and later returned to claim them. When this occurred, POA managers attempted to recover board payments. There is, however, no record of parents actually being refused their children because the parents could not pay the arrears.

Apart from those leaving to return home, the next largest percentage, 32 percent, were placed out as indentured servants (table 2). Arranging the placement of children through indenture contracts was a highly significant aspect of the POA program during the middle years of the

nineteenth century. The managers defended this practice vigorously. The POA would not, the managers said, keep children at the institution dressed "in pauper uniform to grow up a distinct, marked caste; depressed and disgraced by the burden of charity, at first a blessing; eating the bread of idleness . . ." "The "theory and practice" of indenture they considered beneficial to children. According to the managers of the POA, indenture sprang "from the very genius of Protestantism which holds no sympathy with the community system where the many passively submit to the control of a few—but which calls for freedom for the individual, scope for honest endeavor to each and all" "Self-reliance, independence, and the opportunity to become self-sufficient were the goals of the POA policy for children. By moving children as soon as possible into new homes, before they had a chance to become dependent on institutional comforts and protection, the POA tried to assure a productive adulthood for the children it served. Although POA managers recognized the possibility that some indentured children might suffer exploitation, the managers were reassured by their observations of children already placed by the asylum "From the farms and workshops of neighboring counties and States many return to visit the Asylum, with all the vigor of robust health attendant on a life of activity" "15

This philosophy was well adapted to a labor market where the demand for indentured children was heavy. The asylum received more applications for children than it could fill. Most applications came from farmers in Missouri and Illinois, and later from Iowa, Texas, and Minnesota. The asylum preferred to place children in the country "Removed from the temptations of the city, in retired country places, the managers hope they will acquire habits of virtuous industry . . ." "16 However, some children were placed in St. Louis and surrounding towns to learn trades, and others, particularly the girls, were placed as domestic servants with wealthy professional and commercial families.

Boys, upon reaching the age of ten or at the most twelve, were indentured or in other ways discharged from the institution, even over the objections of their parents. One ten-year-old boy "was dismissed from the asylum, his mother not being willing that he should be bound out when a suitable opportunity presented; he being old enough and able to get his own living was no longer deemed an object of charity." "17

The managers valued indenture above family and ethnic ties. If parents were too impoverished or preoccupied to contribute to their children's support, the association reasoned, children would be more likely to become industrious citizens if they were placed where they could learn to become productive. Managers of the POA believed that, for the children of poor parents, indenture was a better alternative than return to the parental home. "18

Little or no effort was made to keep siblings together. Children were placed out when they grew old enough or when a good situation presented itself, leaving younger siblings behind. Siblings were frequently placed far apart, even in different states. This policy of separating siblings eventually came under attack. The German Evangelical Church, which contributed to the POA and had placed German immigrant children at the asylum, started its own orphanage in 1856, at least partly due to dissatisfaction that members of the congregation were being dispersed through indenture.⁹

1870 to 1900

The decade of the Civil War brought lasting changes to the institution. The most significant change was a merger with The Soldiers' Orphans' Home. This institution had been established in St. Louis in 1861 by the Western Sanitary Commission, a temporary, voluntary agency established to provide social and health services to soldiers and their dependents during the Civil War. In 1869, when the Sanitary Commission disbanded, the POA arranged to move its facility to the buildings and grounds of the Soldiers' Orphans' Home, and took over the care of the sixty-five soldiers' orphans in residence.¹⁰ As a result of the merger, the POA moved from downtown St. Louis to the suburban community of Webster Groves.

Another effect of the move was to increase the wealth of the Protestant Orphan Asylum. As part of the arrangement with the Sanitary Commission, the POA had raised an endowment fund of \$24,000 and, in return, received the facilities of the Soldiers' Orphans' Home as a donation. The association also was able to retain ownership of its earlier asylum property, from which it now received a steady source of rental income. The managers created the new position of treasurer of the endowment fund, whose job was to oversee capital investments, rents, and improvements on property owned by the association (now legally a corporation). Donations from churches ceased almost entirely during this period, as did small, individual contributions. Public funding became a temporary source of revenue because the state legislature appropriated money yearly for the support of the soldiers' orphans until 1874. At that time, only twelve children from the original Soldiers' Orphans' Home remained in care.¹¹ Revenue from parents in the form of board payments also increased during this time. Income from this source rose from \$253 in 1850 (11 percent of total annual income) to \$2,760 in 1891 (25 percent of total annual income)¹²

The parental status of the children, the length of stay of children, and reasons for leaving the institution also shifted markedly during the later years. The percentage difference of full orphans admitted during the middle years and the later years was 21 percent. In other words, children admitted during the later years were much less likely to be entirely without parents. Conversely, there was, between the two periods, an 18 percent difference in the number of children with one parent, which means that children admitted after 1870 were much more likely to have a living parent. These differences in parental status of children between the middle and later years have a significance level of $P < .001$ as measured by χ^2 , indicating that the observed pattern was very likely due to real differences in the institutionalized populations (table 2).

Children also tended to stay longer at the institution during the later years. Twenty-two percent fewer of those admitted after 1870 stayed less than a year, while the percentages of those with longer tenures increased. Again, the χ^2 result of $P < .001$ indicates that the observed differences reflect real differences in the populations (table 2).

When they did leave, children admitted after the Civil War were more likely to return to relatives or friends. The difference in percentages of those who left for this reason was 31 percent between the middle and later years. The dramatic decline in the use of indenture during the postwar years is also noteworthy. The percentage difference between the two periods was 29 percent. In other words, indenture, which had declined to 3 percent of all reasons for leaving the institution, was almost entirely eliminated during the later part of the century. The χ^2 result of $P < .001$ for the pattern of reasons for leaving reinforces the view that such reasons indeed changed between the middle and later years (table 2).

These figures reflect a shift in the kinds of children served by the institution. During the middle years, the POA served ragged immigrant children, left stranded by death and separation from transient parents. During the later part of the nineteenth century, the institutional population had shifted to include the offspring of servants and other wage earners, particularly of those working in Webster Groves. Children were also left with the institution on a planned, temporary basis, during periods of parental illness or while the parents sought work. Once established in a job, the parents retrieved their children. These children did not require placement services. The POA received regular board payments for them, and many parents provided their clothing and other necessities as well. For these children, the asylum offered boarding school or twenty-four-hour care rather than a protective shelter or the possibility of indenture placements.

The longer terms of residence in the later years also support the view that the population of children admitted to the POA had shifted. Mothers working in houses in Webster Groves often needed full-time care for young children for a comparatively long time, until the children's schooling was ended or they were old enough to be usefully employed as servants. The shift away from indenture indicates that indenture was no longer a popular option for care of dependent children. By 1875 the indenture system had "passed largely into disuse, if not into disrepute."¹¹ The POA managers were more willing to keep children of destitute families at the institution.

Among the children of immigrants, Germans still were well represented, and Irish, French, Italian, Swedish, Canadian, and Spanish children were also admitted in small numbers.¹² The proportion of immigrant children admitted declined during this period. It is very unlikely that this decline was caused by an explicit policy. Rather, there probably was less need for the POA to house these children. The number of children's institutions in St. Louis increased throughout the century, and many of them took children of immigrants. The Roman Catholic Church established nine orphanages during the nineteenth century in St. Louis. German Protestants founded three homes between 1858 and 1877. The Episcopalian, Methodist, Baptist, Christian, and Church of the Messiah congregations also founded children's institutions, as did the Masons. Public facilities also increased, with the founding of a House of Refuge, an almshouse, and an industrial school for girls.¹³

The POA, during the later period, often served families who were new to the area, but their skills and the more settled nature of the community made their assimilation smoother than in previous years. These families tended to be in economic rather than geographical transition.

Conclusions

Regarding theories that might explain the pattern of care at the St. Louis Protestant Orphan Asylum, there is some evidence to support the view that special children's institutions were created as an advance over congregate care with adults. The POA managers clearly distinguished between the problem of child dependency and that of adult deviancy; they believed that separate institutions were appropriate for each. The managers justified the institution's existence as offering a

refuge especially for "innocent children," whose only problem was lack of adult support, away from the "penitentiary, workhouse or jail."¹⁶ Looking at the broader picture, the amazing expansion of orphanage care in the United States during the nineteenth century and the decline of mixed almshouse care of children during the latter half of the century (table 1) provide general support for this view.

Evidence on the role of social control in shaping institution policy is somewhat more ambiguous. It might be argued that indenture placements that were arranged for nearly one-third of all POA children between 1847 and 1865 (table 2) did have a coercive aspect. Some children were moved into indenture placements with a dispatch that belies the benevolent motives expressed by the association. Family and ethnic ties were not valued highly enough for the association to put off indenture of an older child until a younger sibling could be placed nearby. Parents who could not contribute substantially to the cost of care were strongly encouraged to release their children to the asylum for an indenture placement. Thus, indenture sometimes served the needs of the community at the expense of poor families. The indenture placement was inexpensive compared to keeping the child in the institution, so it was an economical policy for the community at large. Indenture also provided domestic servants and farm labor to established American citizens, so the program offered something of value—child labor—to the community. In addition, indenture placements moved potential troublemakers out of the urban slums and diffused them throughout the rural areas. The threat these children might have posed to established moral and social order was thought to be mitigated by moving them out of the city and keeping them occupied with farm work.¹⁷

However, against these considerations must be placed the purpose of indenture as expressed by the asylum leaders. According to the POA managers, an indenture placement offered assimilation into the new world or an opportunity to become a productive citizen in a new community. It also offered stability to children whose lives otherwise would have been chaotic. The managers also argued that, for children unable to return home, indenture was preferable to retaining the children indefinitely in the institution. They contrasted favorably the health and independent spirit of children they placed out with the "poor, pale looking orphan children of an Institution . . . trained to despondency. . . ."¹⁸ Thus the asylum's goals for its children appeared to be the opposite of social control. The POA's mission was to help children find an independent foothold in the economy rather than to shape up potential slackers for the labor market.

If the social control theory does not fit the evidence very well, neither does Rothman's view that institutions were intended to create an environment of discipline, predictability, and routine as an antidote to

the disorder outside the institution. The POA did not respond to the disorder of massive immigration by creating an island of stability and order. During this time, the POA more closely resembled a way station, a youth hostel, an Ellis Island for children than it did a formal, carefully controlled environment to meet desired social ends for its inhabitants. Few children stayed more than a year, and nearly a quarter of those admitted during the twenty years before the Civil War were housed at the institution less than a month. Children simply were not inside the institution long enough to have benefitted from a corrective regimen. The criticisms of the effects of prolonged institutionalization on children voiced by women who were themselves running the institution also argues strongly against Rothman's view that institutions were considered the most desirable form of care for dependent children. The institution's program emphasized establishing placements for the children, either with family or through indenture. The emphasis was not on maintaining a highly structured institutional routine.

The labor market view offered by Sherraden—that is, that child care institutions developed in large part because all available young people were not needed in the labor force—is documented by the history of the POA. The remarkable decline in indenture placements, from 32 percent during the 1847–65 period to only 3 percent during the 1871–96 period (table 2), is strong evidence that young people's labor was no longer in heavy demand, at least compared to earlier periods. Increasing length of stay in the asylum during the later years (table 2) further supports this interpretation.

Overall, however, there is another explanation that covers more of the facts than any of those listed above. The records of the Protestant Orphan Asylum suggest that the children's institution offered a solution to problems of transiency. During the earlier years, many of the children in the POA were from poor, urban families, but these children, like those who came later, needed institutional services not only because they were poor but because their families were new to the city, isolated, and had no informal community supports to help them. The POA's function of serving the needs of transient families was especially apparent during the middle years of the nineteenth century, when St. Louis did not have a particularly large or troubling urban slum but was absorbing a large number of new immigrants and also had unprecedented numbers of people passing through the city to other destinations. Children of the later years were more likely to have families, many of whom were planning to settle permanently in the St. Louis area. These families were in economic transition. But these families, too, because of their newness to the city, were especially vulnerable when faced with unemployment, illness, and death of a parent. During each period, transiency, combined with poverty, created the kinds of problems addressed by the institution.

The connection between transiency and the development of institutions for dependent children was perhaps particularly evident in St. Louis, a city at the western edge of American settlement during much of the nineteenth century. However, it is possible that the problems of transient families accounted in large part for the development of institutions in the eastern part of the nation as well. Based on what we have uncovered in the records of the POA, and considering general trends of immigration into the United States and internal migration during the nineteenth century, it is likely that similar patterns were repeated in institutions elsewhere. The needs of transient families probably shaped the development of institutional child care during the nineteenth century to a greater extent than has previously been suggested.

Notes

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2 Robert Bremner et al., eds., *Children and Youth in America: A Documentary History* (Cambridge, Mass.: Harvard University Press, 1970), 1:655.

3 See Ralph F. Pumphrey, 'Compassion and Protection: Dual Motivations in Social Welfare,' in *Compassion and Responsibility: Readings in the History of Social Welfare Policies in the United States*, ed. Frank R. Breul and Steven J. Diner (Chicago: University of Chicago Press, 1980), pp. 5-13; Henry W. Thurston, *The Dependent Child: A Story of Changing Aims and Methods in the Care of Dependent Children* (New York: Columbia University Press, 1930), and David Rothman, *The Discovery of the Asylum* (Boston: Little, Brown & Co., 1971).

4 In addition to Rothman, cited above, see Raymond Mohl, "Humanitarianism in the Prevention of Pauperism," *Journal of American History* 57 (December 1970): 576-99; Lois Banner, "Religious Benevolence as Social Control: A Critique of an Interpretation," *American Journal of History* 60 (June 1973): 23-41; Michael B. Katz, *Irony of Early School Reform: Educational Innovation in Mid-Nineteenth-Century Massachusetts* (Cambridge, Mass.: Harvard University Press, 1968).

5 Rothman, p. xviii.

6 Michael W. Sherraden, "Institutionalization of Children and Youth in the United States, Colonial Times to 1970" (research in progress, Washington University, St. Louis) data on dependent children in nineteenth-century institutions are discussed in Michael W. Sherraden, "Abuse and Neglect of Children in Institutions: The Nineteenth Century" (paper presented at the Missouri Valley History Conference, Omaha, March 1980).

7 Bremner suggests that by mid-century half the children in reformatories and houses of refuge were immigrants or had foreign-born parents (Bremner et al., eds., p. 400). Wines estimates that by 1880, about 40 percent of all almshouse inmates were immigrants (see U.S. Department of the Interior, Census Bureau [Friedrick H. Wines], *Report on the Defective, Dependent, and Delinquent Classes of the Population of the United*

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8 Richard C. Wade, *The Urban Frontier: The Rise of Western Cities, 1970-1815* (Cambridge, Mass.: Harvard University Press, 1959), pp. 283-97

9 Fern Boan, *A History of Poor Relief Legislation and Administration in Missouri* (Chicago: University of Chicago Press, 1941), p. 19

10 Evelyn Roberta Koenig, "The History of the Episcopal Home for Children in St. Louis" (master's thesis, Washington University, St. Louis, 1936), p. 20

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12 *Ibid.*, p. 218

13 Ann N. Morris, "The History of the St. Louis Protestant Orphan Asylum," *Missouri Historical Society Bulletin* 35 (January 1980): 80-91, esp. 80

14 *Tenth Annual Report of the Protestant Orphan Association* (St. Louis, 1845), p. 3

15 *The Second Annual Report of the Ladies' Protestant Orphan Association of Saint Louis* (St. Louis, 1837), pp. 7-8

16 *Ibid.*

17 *The Fifth Annual Report of the Protestant Orphan Association of St. Louis, Missouri* (St. Louis, 1840), pp. 4-5

18 *Eleventh Annual Report of the Protestant Orphan Association* (St. Louis, 1846), p. 2

19 *The Third Annual Report of the Ladies' Protestant Orphan Association of St. Louis* (St. Louis, 1838), p. 4

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21 J. Potter, "The Growth of Population in America, 1700-1860," in *Population in History*, ed. D. V. Glass and D. E. C. Eversley (Chicago: Aldine Publishing Co., 1965), pp. 631-89, esp. p. 683

22 *Eleventh Annual Report*, p. 2

23 Discussion of David Polk, "Children in Asylum, 1847-1855-1863" (a record book of admissions of the POA currently located at Edgewood Children's Center, Webster Groves, Missouri)

24 *Eleventh Annual Report*, p. 2

25 Discussion of Henry and Wilham Hobson, "Children in Asylum, 1847-1855-1863"

26 Discussion of Murv family, "Children Admitted 1842-1850" (a record book of admissions of the POA currently located at Edgewood Children's Center, Webster Groves, Missouri)

27 Martha Osborn Winget, "A History of the St. Louis Protestant Orphan's Home 1834-1870" (master's thesis, George Warren Brown School of Social Work, Washington University, St. Louis, 1943), p. 80

28 Discussion of Pool family, "Children in Asylum, 1847-1855-1863"

29 Discussion of Graves family, "Children in Asylum, 1847-1855-1863"

30 This estimate is based on the ages of a random sample of children admitted during this period. The sample was obtained by selecting all children listed in the record book, "Children in Asylum, 1847-1855-1863," whose last names begin with A through H

31 Winget, appendix A "Charter of the St. Louis Protestant Orphan's Home," p. 161

32 *Fifth Annual Report*, p. 4

33 *Nineteenth Annual Report of the St. Louis Protestant Orphan Asylum* (St. Louis, 1854), p. 8

34 *Ibid.*

35 *Ibid.*, p. 9

36 *Eighteenth Annual Report of the Protestant Orphan Association of St. Louis* (St. Louis, 1853), p. 5

37 Discussion of Brume family, "Children in Asylum, 1847-1855-1863."

38 Discussion of Breitenstein family, "Children Admitted, 1842-1850"

39 Lois Pierce, "From Isolation to Integration: The German Protestant Orphan's Home, 1858-1938" (unpublished paper, Washington University in St. Louis, 1976), p. 6

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- 40 Morris, p. 86
- 41 Isabel Ruth Johnsmeyer, "A History of the St. Louis Protestant Orphan's Home, 1871-1900" (master's thesis, Washington University, St. Louis, 1943), p. 89
- 42 Winget, pp. 104 and 119; Johnsmeyer, p. 83
- 43 Homer Folks, *The Care of Destitute and Delinquent Children* (New York: Macmillan Co., 1902), p. 41
- 44 "Admissions and Departures 1880 Entrance Dates 1870-1890" (a record book of admissions of the POA currently located at Edgewood Children's Center, Webster Groves, Missouri)
- 45 Koenig, p. 20
- 46 *Twenty-third Annual Report of the Protestant Orphan Asylum of St. Louis* (St. Louis, 1858), p. 6
- 47 The use of rural areas as a repository for potential troublemakers is suggested in many of the asylum's records of placement decisions (see, e.g., *Third Annual Report*, p. 4; *Eighteenth Annual Report*, p. 5; *Twenty-third Annual Report*, p. 6)
- 48 *Nineteenth Annual Report*, p. 8

Notes on Policy and Practice

Fighting Back: A Critical Analysis of Coalition Building in the Human Services

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This article is an analysis of the coalition-building process in the human services that has emerged in response to continued cuts in funds for social programs. Two case studies of a local and a statewide coalition and interview data from forty human service agencies in the San Francisco Bay area are presented and discussed. The findings point to an increasing role for coalitions in the 1980s as more agencies are threatened by funding cuts.

In the summer of 1982 the largest political demonstration in U.S. history took place in New York City under the banner of the "June 12 Coalition," coinciding with the second UN special disarmament session. Leslie Cogan, a representative of the New York rally, noted that well over 100 groups participated in the planning of the event and "represented constituencies that historically have not worked together."¹ Similar gatherings were held in several other cities, from Boise, Idaho, to Augusta, Maine. In San Francisco, more than 200 groups organized a march and demonstration united under the broad slogan of "peace." This coalition included antiwar as well as other organizations promoting social and economic justice for the poor and minorities in this country.

In the human services field, ad hoc coalitions have also been forming in recent years, with varying degrees of success, to publicize major social concerns and fight threats to the very existence of a wide range of social programs long considered an integral part of the reluctant

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American welfare state. Provider and recipient, advocacy and interest group have all found it both useful and appropriate to join together.

A Coalition to Fight Infant Mortality, made up of more than forty local organizations, churches, and clinics, responded to the publication in 1978 of county health statistics that revealed dramatic differences in white and nonwhite infant mortality rates in Oakland, California. Working together with state and local officials, funds were received to launch a perinatal health project in the city. In Missouri, the Coalition for Sensible and Humane Solutions was formed in 1981 "in direct response to President Reagan's budget message to the country that represented an announcement to withdraw governmental support to meet human needs."³ More than seventy organizations and 1,000 individuals joined together to fight these policies and have engaged a wide range of organized activities around the state.

Nationally, the Fair Budget Action Committee (FBAC) formed a coalition of 1,000 member organizations from forty-eight states to focus attention on the Reagan administration's tax and military spending policies and its full-scale attack on service programs, which require "a unified response on the part of organizations which have traditionally worked on a more narrow range of issues."⁴ In northern California the Community Education Roundtable, initially formed to coordinate and assist efforts of the low-income community to respond to proposed budget cuts, has established itself as the local arm of FBAC.

In California a statewide Human Services Coalition emerged during the legislative battles over California's response to the new health and human service block grants. It was the catalyst in the development of legislation to ensure access by community-based organizations to the crucial debate.

In the San Francisco Bay Area, an effort was begun in early 1981 to organize advocates and providers of human services to protest the cuts in programs and benefits that began in California with the passage of Proposition 13 and have now become epidemic with the large reduction of state "bailout" funds for local governments.⁵ Program closures, major staff layoffs, and reductions in benefits to the poor, disabled and sick are no longer a threat. Austerity in the human services has become an unwelcome but chronic theme for the 1980s.⁶

In response to the current crisis in human services, social agencies and advocacy groups have developed a wide range of organizational and political strategies. In addition to the use of conventional advocacy and cutback management techniques, concerted efforts have been made to generate new sources of revenue, reevaluate organizational priorities, and engage in community education and political action. As the problems of austerity become increasingly clear to the various human service constituencies, both organizational and interorganizational

zational responses will have to be subjected to careful analysis and study.

This article is concerned with one of the strategies social agencies and related interest groups have developed in response to austerity—coalition building. It draws on the organizational experiences of two California coalitions—the Bay Area Advocates for Human Services (BAAHS) and the California Human Services Coalition (CHSC). In addition, interviews were conducted with directors of forty San Francisco Bay Area social agencies providing food and emergency services. This article also reviews and applies literature on coalitions from related fields to the human services arena.

A central premise behind this analysis is that, in a period of instability and waning public support for human services at the federal level and of growing decentralization of funding mechanisms and administration of social programs through the "New Federalism" and the block grant process, the need to form coalitions across traditional interest groups will increase.⁸ These groups are likely to reflect federal categorical program areas, such as services to children, the elderly, the developmentally disabled, women, and minorities. A social planner or program manager who formerly sought federal funds earmarked for a particular population group will now have to join in the county and state fray for a share of general tax revenues and block grant funds. "Picket fence planning," as it has been called, will no longer do the job. As a result, the amount of activity at the local level between service providers with long-standing, complementary interests will rise relative to the time spent in vertical transactions with federal authorities.⁹ Whether these more horizontal relationships develop along cooperative lines or each program area and interest group goes its own way and fights it out for its fair share of dwindling state and local funds remains to be seen.

If the latter occurs—call it the "competitive model"—state and local legislators will be bombarded with a disorganized collection of special interests fighting for their own human service programs and entitlements. This is not likely to be well received in state capitals or county seats, nor will it lead to an increase in the total amount of funds allocated for human service programs. It is also unlikely to serve the best interests of the poor and disadvantaged for whom such programs are intended.

On the other hand, if the former takes place, a great deal of give and take would be required, reflecting a growing recognition by providers of the interdependence of the human services and the social problems they are meant to address. An increasing number of shared interests and common goals could surface, and coalitions could emerge as effective mechanisms to reach common goals and ultimately to "fight

back," overcoming, at least in part, "the growing sense of powerle and potential divisiveness implicit in a period of declining resour

In his cross-cultural look at joining behavior, Jeremy Bois notes that coalitions arise primarily in situations where securit a minimum.¹¹ By "security" he means societies in which the r law is accepted and where the state can guarantee the interes values of the more formal corporate enterprises. As Eric Wo observed in his study of peasant societies, "For psychological prot people tend to form coalitions to counterbalance formal dema organizations to render life more meaningful and to simply unpredictable situations somewhat more predictable."¹²

Certainly as the more formal mechanisms for gaining public for categorical programs have been dismantled, human servi ganizations have found themselves in an increasingly powerless situ buffeted by one fiscal and political crisis after another that frequ threatens their very existence. Theodore Caplow notes that, in situ where the distribution of power has been disturbed, the likelih coalition formation increases sharply.¹³ He goes on to describ basic pattern of conflict that usually takes the form of a "triad com of a witness whose support is solicited by both antagonists."¹⁴ In c parlance, one could translate those for and against reduced spe for human services as the "antagonists" courting the public a various layers of elected officials who serve as the "witnesses."¹⁵

During the incremental growth in human services in the sixtie early seventies, grassroots advocacy groups proliferated among w the elderly, the disabled, and those concerned with the environir. In his recent book on the new citizen movement, Harry Boyte that many of these organizations soon expanded their base of su and developed "new approaches that stressed the need for coa building between different constituencies."¹⁷

As organizations struggle through the present period of de primarily caused by "external" economic and political factors, a recession and government funding cuts, Levine observes that tend to both "smooth" and "resist" the decline.¹⁸ Resisting stra include (a) improving legislative liaison, (b) educating the public an agency's mission, and (c) mobilizing dependent clients. Smoo strategies include (a) making peace among competing agenci cutting low-prestige programs, and (c) sharing problems with agencies.

At present in the Bay Area, human service agencies are respo with both smoothing and resisting strategies. At the July 1982 m of twenty-five Bay Area coalition representatives in San Fran sponsored by the Northern California Community Education R table, the needs were voiced to press on as individual coalition in some cases, merge common organizing efforts

To understand better some of these interorganizational efforts to cope with the current crisis in the human services, some of the major terms and concepts in the coalition literature are discussed in the next section.

Theories and Types of Coalitions

Most of the literature on coalitions is drawn not from experience in the social services field but from related disciplines, such as economics, social psychology, and political science. Also, empirical work on coalitions is primarily based on small organizations with a focus on the behavior of individuals and groups as they negotiate and compete for power and resources.¹⁹ On a macro political level, the primary data base for theory building on coalitions is the behavior of elected officials and their parties and interest groups as they jockey for position to pass legislation, create alliances, and form governments.

The relevance of this body of literature to human service organizations is unmistakable. Most of the concepts introduced become invaluable tools in helping to understand and explain current attempts by social agencies and service recipients to use coalitions to challenge public attitudes about social welfare.

While Paul Hill has taken a major step toward the development of a consistent set of concepts, he admits that "the whole does not add up to a theory."²⁰ In a detailed review of the literature, however, he is able to identify three basic theoretical models that have been used to analyze coalition behavior: (1) mathematical-normative, (2) economic, and (3) social-psychological. While the third model is the least elegant, it is best suited for investigating the cognitive processes behind coalition joining and helping to explain the interactions between coalition members.

Why Members Join Coalitions

Adrian and Press provide some insight into the question of why individuals and groups join coalitions drawing considerably on the cost-benefit model.²¹ They identify an entire range of internal and external costs, since a rational participant will look at both before starting or choosing to join a coalition. Their categories include (1) information costs involved in gathering information about potential strategies (high information costs would mitigate against the formation of minimal coalitions); (2) responsibility costs involved in allowing a person or group to have policy decisions attributed to them; (3) division of payoff costs involved in distributing payoffs among members of a winning

coalition, (4) dissonance costs incurred during periods of disagreement (5) inertia costs involved in shifting existing coalition memberships (6) time costs involved in lost staff time, including the notion of opportunity costs; and (7) persuasion costs involved in recruiting additional and sometimes reluctant, members.

Hill postulates that prospective members of a coalition will choose to join a "winning" coalition that maximizes their "expected share of the spoils" (ESS).²² He even develops a mathematical expression that members will try to maximize: $(r/R)W$, where r = member's resources, R = winning coalition's total resources, W = coalition's ideological worth (or nearness of coalition policy to member's own preferences).

In the case of human service organizations, as well as most other types, although some may join coalitions for altruistic, ideological, and even friendship reasons,²³ certainly the advancement of the interest of their own programs and constituencies is likely to be a primary concern.

William Riker takes this concept one step further by introducing the notion of the "minimum winning coalition."²⁴ In applying game theory to coalition building, he identifies and observes the "size principle" that is, participants create coalitions just as large as they believe will ensure winning and no larger. William Gamson was able to transform some of these more mathematical insights into social and psychological terms.²⁵ He explains the cognitive processes behind coalition joining as well as the interaction of group behaviors. His hypothesis is that participants will form minimum winning coalitions based on their perceptions of the objective mathematical world.

A corollary of this notion is that keeping the number of participants down will likely maximize the ESS of each participant. Given the magnitude of the current fiscal crisis facing the human services, however, coalition size per se does not seem to be a major issue.

Coalition Defined

Coalition comes from the Latin word "coalitio," from "coalescere," "to grow together." It has been defined as "a combination of two or more actors who adopt a common strategy in contention with other actors in the same system."²⁶ It generally reflects a temporary alliance of political groups or forces in nature for specific objectives.²⁷

In the human services arena, coalitions have long been an effective vehicle for social planners in convening groups and individuals with at least parallel, if not complementary, interests. Yet very little has been written about them, and they are often used by planners, organizers and agency managers without a very clear understanding of their limitations or capabilities. ■

Wilensky and Lebeaux, in their classic study of the welfare state in an industrial society, mention the role of "councils of social agencies" (variously called "community welfare councils" and "health and welfare federations") that provide vehicles for coordination of services through the use of social service exchange, case conferences, welfare resources handbooks, and community information services.²⁸ They go on to note that the councils often serve as the key coordinating unit at the community level and, at their best, represent the "high point in democratic participation in American communities."²⁹ Coalitions, other ad hoc groupings, and the organizational mechanisms needed to develop and sustain them are hardly mentioned in their text. Nor, for that matter, do they merit much attention in any of the major texts or journals on organizational strategies for human service agencies.³⁰

Boissevain distinguishes coalitions from more structured organizations. He notes that "coalitions, though present in all societies, play a more important role in organizing activities in some than in others where formal associations rather than coalitions organize the same activities."³¹ Certainly since 1977 (just prior to the campaign to defeat Proposition 13) the role of coalitions has been growing in importance in California as agencies and interest groups look for more dynamic, albeit temporary, alliances to further their aims in a period of fiscal change and organizational instability. Local and statewide coalitions like those discussed in this paper simply did not exist in a more affluent period.

The primary characteristics of coalitions that distinguish them from more formal federations or councils include the following: (1) coalitions are temporary, (2) they have both core and peripheral members; (3) they are formed for a limited purpose; (4) they imply the joint use of resources; and (5) resources are attached to each member and may be withdrawn at any time.³² Thus, coalitions are viewed as distinct from more formal "corporate" groups that are likely to have a more permanent existence and be composed of people recruited along recognized principles who have common interests and rules that establish specific rights and duties for their various interrelationships.

Boissevain goes on to identify four major types of coalitions—cliques, gangs, action sets, and factions. He lists other terms often associated with coalitions—salon, coterie, machine, social circle, team, following, and entourage. Cliques are defined as a coalition whose members associate regularly on a basis of affection or common interest and possess a marked sense of common identity. Gangs have similar qualities but tend to be more leader oriented. Action sets are made up of persons who consciously coordinate their actions to achieve a particular goal. Factions are similar in most respects; however, members are recruited by, or on behalf of, a person in conflict with another person(s)

with whom they were formerly united over honor and control resources.

In the examples cited in this paper, the coalitions that have formed tend to be "action sets." Agencies and interest groups have cleaved together to act in concert to fight cuts in human service programs. However, as the struggle over resources intensifies among community-based organizations (many of whom have county contracts to deliver services) and the public sector, the formation of dissident "agency" factions fighting it out for their own survival may become more like

The Coalition Experience—the California Human Services Coalition

In the fall of 1981, the California Human Services Coalition (CHSC) was formed through the efforts of the California Coalition of Hispanic Organizations, the Center for Community Change, the Western Center on Law and Poverty, and others to hold block grant workshops throughout the state and lobby for the passage of Assembly Bill 218, a bill designed to ensure local community participation in the administration and use of federal block grant funds. The bill was passed, and a Block Grant Advisory Task Force was established made up of members representing local government, community-based organizations, and recipients of services under the former federal categorical programs.

The coalition is made up of agency and advocacy group leaders from throughout the state, primarily representing community-based interests. While it has never met formally as a whole, it has had strong support from the Center for Community Change and the Western Center on Law and Poverty. Well-qualified, seasoned staff has been an essential ingredient in the success of the coalition thus far.

At a Statewide Block Grant Conference in Sacramento in January, 1982, organized by the CHSC, the chairman of the State Assembly Ways and Means Committee noted the "absolutely critical role the Coalition played in ensuring the passage of AB 2185."¹¹ He and other officials went on to note the important role coalitions such as the CHSC will play in the decisions affecting human services in the next few years. At the same conference, a chief representative for the speaker of the assembly cautioned all human service advocates to lobby legislators as hard as possible, but as a unified force rather than as separate special interests, as was fashionable and effective in earlier more affluent times.

Like all coalitions, the CHSC has not been able to sustain fully high political profile and level of its organizational activity level. The Block Grant Task Force, however, appointed shortly after the January conference in Sacramento (one-third of whose nine members came from a CHSC-proposed slate), has benefited from the coalition's early

momentum.¹¹ For instance, members of the coalition have been working closely with the task force in planning local public hearings throughout the state on the block grant monitoring process.

Even though transportation and communication costs involved in organizational efforts in a large state like California are increasingly prohibitive, CHSC members remain committed to the idea that a road-based unified voice needs to be heard at the state level. The major structural issue with which it is grappling is the degree to which it should adopt a more formal statement of purpose and set of bylaws.

Bay Area Advocates for Human Services—the Experience of a Local Coalition

The Bay Area Advocates for Human Services (BAAHS) began in the spring of 1981 in direct response to growing fears among human service providers that federal funding for social programs under the Reagan administration was to be drastically reduced. The first large-scale layoffs, particularly among public employees in counties, also began to occur as a result of cuts in state bailout funds to local governments that had been available during the first two years after the passage of Proposition 13 in June 1978.

According to one of the early leaders of BAAHS, the election and policies of Ronald Reagan are what "got the coalition started." Initially, about twenty representatives of Bay Area social agencies were called by a staff member of a county agency who had developed long-standing ties with community agencies and groups in the area. Many of these individuals were already active in more specialized countywide coalitions and councils. A large proportion were from the child welfare field, which was particularly feeling the new fiscal constraints on its programs.

The coalition's initial goals were to gather and disseminate information about cuts to existing coalitions in the five Bay Area counties and to share information about how other programs were being affected. A long-term goal was to increase the ability to lobby more effectively at both the county and state levels for funding for all human services, not just for each individual program. It was believed that individual agencies could not afford to "go it alone" anymore as part-time lobbyists or just their own programs.

Another goal was simply to form a support group. One coalition leader commented: "With public support waning for human services and funds diminishing rapidly, everyone's a little scared and the need to just hear how others are coping is important." Over the months, a core group of about ten members has continued to attend regular monthly meetings. A mailing list of those who have attended exceeds 100 and includes representatives from health and social services, public and private agencies, and labor and ethnic organizations in all five

Bay Area counties. Attendance at meetings numbers between ten and twenty, depending on the agenda for the meeting.

The lack of a stable membership and an ongoing staffing mechanism have remained chronic problems for BAAHS. Meetings continue to be held in San Francisco, making it difficult for some members outlying counties to attend. A list of the coalition's major goals and objectives has been developed. These are aimed at lobbying, information sharing, and coordinating organizational responses to cuts in human services. Three informal committees—media, legislation, and research—have been formed and meet on an irregular basis.

BAAHS has succeeded in providing an organizational vehicle for Bay Area human service agencies and advocacy groups to speak in concert about the local impact of cuts on social programs. Six countywide and issue-specific coalitions have carried on similar efforts. One tangible and successful lobbying device has involved sending letters on pending legislation to elected officials from the coalition leadership. Even though a number of other specific activities have not always been totally successful (i.e., a demonstration in the state capital and a coordinated research and monitoring effort in each county on the impact of cuts), others, such as an effort to involve clients and consumers in a large-scale letter-writing campaign, have gone well. As time goes on, coalition members will be better able to determine strategies best suited for this kind of group. With the availability of even minimal staff support, BAAHS would be able to increase its effectiveness considerably.

Coalition Experience among Forty Bay Area Human Service Agencies

In the spring of 1982, a survey of administrators of forty private nonprofit social service organizations providing food, clothing, and shelter was conducted in four Bay Area counties. The agencies were selected through a combination of availability and purposive sampling procedures.¹⁵ Interviewers selected a representative group of both large and small agencies from directory lists of emergency service organizations. A questionnaire was designed to assess changes in agency behavior over the past year resulting directly from federal funding cuts. Coalition behavior was one of a number of issues raised by the researchers.

Among the forty agencies, just over half (twenty-two) are current members of coalitions. Almost three-fourths (fifteen) of the twenty-two members claim they are "very active" (defined as "playing a leadership role"). The average length of time of membership since joining is just over four years, ranging from membership of a few months to a decade.

Only one of the twenty-two coalition members reports a decrease in its level of involvement in recent months, whereas almost two-thirds

Table 1

RELATIONSHIP BETWEEN COALITION MEMBERSHIP AND PERCEIVED THREAT TO AGENCY EXISTENCE

	MEMBERSHIP		NONMEMBERSHIP		TOTAL	
	No	%	No	%	No	%
Threat to agency existence	10	83	2	17	12	30
No threat to agency existence	12	43	16	57	28	70
Total	22	55	18	45	40	100

NOTE—Yule's $Q = .74$

(fourteen) report an increase. While some agencies are involved in more than one coalition, most claim membership in just one. A few agencies actually belong to the same coalitions (i.e., three to a neighborhood planning coalition and three to an emergency food coalition).

There is a strong relationship (Yule's $Q = .74$) between coalition membership and a perceived threat to an agency's survival (see table 1). More than 80 percent of those agencies whose funding is threatened belong to a coalition, whereas less than half of those not threatened belong.

Just over half (23) of the agencies in the sample report a recent change in government funding, fifteen faced a decrease, and eight faced an increase (see table 2). Those with decreased budgets are more likely to be a member of a coalition, further supporting the notion that coalition membership occurs more frequently among agencies facing fiscal problems.

Among the twenty-two emergency food and shelter programs in the San Francisco Bay Area who are members of coalitions, nine (41 percent) identify information sharing and eight (36 percent) legislative lobbying as the major goal of their respective coalitions. Electoral

Table 2

RELATIONSHIP BETWEEN COALITION MEMBERSHIP AND A CHANGE IN GOVERNMENT FUNDING

	MEMBERSHIP		NONMEMBERSHIP		TOTAL	
	No	%	No	%	No	%
Decrease in government funding	13	87	2	13	15	65
Increase in government funding	2	25	6	75	8	35
Total	15	65	8	35	23	100

NOTE—Yule's $Q = .90$. The agencies included in this table are only those that reported a recent change in government funding.

politics, public information (media), and fund raising are viewed as primary goals by the remaining five members.

Staff time "costs" are mentioned by seven of the twenty-two members as the most serious problem for coalition members, although an equal number report "no problems" at all in working with their coalitions—a surprisingly strong endorsement of the coalition process by almost a third of the members in the agency sample.

Among the eighteen agencies in the sample (45 percent) who are not members of coalitions, the major reason for not joining is mixed. Four agencies are not even aware of the existence of coalitions—a modest but clear indictment of the outreach efforts of the various coalitions in the area. Lack of goal congruence, demands on staff time and a perception of the ineffectiveness of coalitions are also mentioned with equal frequency as the most common reasons for not joining. Some coalition members and nonmembers in the voluntary sector express concern about the possibility of compromising their "non-political" status as nonprofit organizations.

Discussion

From the foregoing presentation of case studies and survey data, at least three questions can be formulated. Are coalitions going to be useful as an interorganizational strategy for the 1980s? What can be applied from the literature on coalitions to the human services arena? And, from an agency point of view, do the benefits of joining coalition outweigh the costs?

In approaching the first question, this study presents some evidence of the viability of the coalition as a useful tool for human service agencies during the current fiscal crisis. The creation of the Block Grant Task Force was clearly a major victory for CHSC and would have been extremely unlikely without a broad-based and politically savvy statewide coalition in place.

BAAHS, although less successful thus far on a political level, remains an effective forum for information sharing and support for local human service organizations. Its role as a consolidating force in the Bay Area will continue to counter trends to adopt a more competitive style of lobbying and fund raising among natural allies in the various human service fields. Also, the coalition's access to grassroots organization and service recipients provides the opportunity to mobilize client groups across an otherwise fragmented array of interest groups.

Although many of the emergency food and shelter programs surveyed are not members of coalitions, the large majority of those who are

consider themselves "very active." It is no coincidence that in California the average length of time since joining a coalition is only four years—coinciding with the Proposition 13 campaign in California in the summer of 1978—and that those agencies most threatened by funding cuts are the ones most likely to belong.

In response to the second question, while admittedly only some of the literature on coalitions is relevant to the social agency as the primary unit of analysis, a few points from our earlier discussion are relevant. Certainly, the data in this paper support Boissemay's notion that coalitions tend to form during periods of insecurity. Almost all of the member agencies surveyed report an increase in their involvement in recent months; and, of course, the CHSC and the BAAHS did not exist prior to the Reagan era. Lobbying efforts were generally left to individual agencies through more formal councils and federations. With the demise of categorical funding streams and decreasing resources, agencies apparently began looking for more flexible and broad-based organizations to further their collective interests. Ad hoc coalitions provided one vehicle to accomplish this and gave agencies the opportunity to adopt both "resisting" and "smoothing" strategies outside their more narrow fields of interest.

The process of seeking allies in the formation of these coalitions in the human services has not been characterized by any reluctance among participants to join forces against a perceived antagonist, and it seems very much in line with Caplow's notion of "coalitions in triads."¹⁷ If coalitional strategies are to continue to be successful and avoid undue acrimony between competing interests, public and community-based agencies—many of whom are under county contracts to provide service—will have to remain allies or risk becoming factionalized and even more vulnerable.

Finally, from an agency perspective, perhaps the most interesting question remains, Why should one join a coalition? Certainly, the fact that eighteen of the forty agencies surveyed had not joined belies the notion that coalitions are for everyone. In many cases they are not—both from an agency's and a coalition's point of view. At least some of the costs, as outlined by Adrian and Press, are taken very seriously by agencies before joining a coalition.¹⁸ Among the forty agencies surveyed in this study, staff time remains the major constraint to joining. Another is the concern that coalitions will not have compatible goals and may compromise the political neutrality of their nonprofit members.

These costs are, of course, compounded by the temporary nature of any ad hoc group. Yet, clearly there are many perceived benefits among those who join. Lobbying elected officials on specific legislation through a coalition is viewed as a key motive for joining. Ironically, the passage of favorable legislation for human services benefits members

and nonmembers alike. Other benefits reported by members are less transferable, however, such as increased referrals and publicity from their agency's participation in a coalition. The benefit most frequently noted by participants in this study is their enhanced ability to gather and exchange information in an increasingly volatile and complex human services field. In the years ahead, this need will probably continue to serve as a major attraction to continuing and potential coalition members.

From a coalition's perspective, the sheer numbers of its membership can be a major factor in its success. For Riker and Gamson, however, the "size principle" is a more complex phenomenon and needs to be examined more carefully to understand fully the process of coalition formation. In the human service arena, the representativeness of a coalition has been as much of an issue as its size. In the case of the CHSC, the pressure to broaden the representation of the Block Grant Task Force to include Native Americans and the disabled was strong and eventually exerted its influence. For BAAHS, the fact that representatives from labor and ethnic organizations have joined together with service providers has been a major factor in its success.

While a more broadly based membership can only strengthen a coalition's organizational clout at the state or local level, in the human services it is perhaps premature to determine how large a "minimum winning" coalition must be. In the meantime, agencies and interest groups will undoubtedly continue to seek funds and political support through a combination of individual and collective efforts.

Conclusion

The goal of this paper has been to examine some of the issues in the development of at least one organizational response to austerity—coalition building. While the data provide an empirical base for a critical look at coalitions in the human services, they are too sketchy to allow for evaluative judgments. The absence of clear, measurable goals and objectives from the coalitions themselves also makes it difficult to assess accurately their effectiveness or impact relative to other organizational responses to austerity.

The study does, however, raise some vital questions about the role of coalitions in the human services field in the years ahead. It suggests a broad and growing acceptance of the coalition-building strategy by a large proportion of those agencies and organizations currently active in the process. This is especially true of those agencies already threatened

by funding cuts. As more programs are affected by cuts, they are likely to follow a similar pattern and form or join their own coalitions. The degree to which human service organizations are successful in "fighting back" in a period of austerity will depend in part on their ability to use coalitions effectively to shape public opinion and influence the political process.

Notes

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29 Ibid., p. 264

30 In our reader—Fred Cox et al., *Tactics and Techniques of Community Practice* III (F. F. Peacock, 1978)—a small section on "Coalition Formation and Development" is included, which presents a case study on an effort by some agencies to collaborate in the development of new services for the elderly. In the consumer education similar dearth exists of substantive materials on coalition building. In a recently published booklet, *An Essential Bibliography for Coalition Building* (Roslyn, Va.: Consumer Education Resource Network, June 1982), the references are limited to the very general issues of fund raising, organizational management, and use of media.

31 Boissevain (n. 11 above), p. 160

32 Ibid., pp. 170–205

33 Remarks by California State Assemblyman John Vasconcellos, chairman of the State Assembly Ways and Means Committee, at the Statewide Block Grant Conference, Sacramento, January 19, 1982

34 This number has been increased to allow for representation from various groups (e.g., children's services, the disabled community, Native Americans) who originally not included on the task force

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Teenage Pregnancy and Public Policy

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Pregnancy among teenagers has caused widespread concern. The number of pregnant adolescents and the difficulties they face are significant. This paper outlines what social science reveals about the scope and consequences of teenage pregnancy. The authors review the history of policies and legislation that have addressed the problem and summarize the complexities of public involvement in teenagers' contraception, unplanned pregnancy, and parenthood.

Earlier maturation and increasing sexual activity result in more than 1.3 million pregnancies among thirteen- to nineteen-years-olds in this country each year.¹ Most teenage pregnancies are unintended.² Physically, psychologically, economically, intellectually, and socially most young people are ill equipped for responsible parenthood.³ Yet more than two-thirds of teenage pregnancies end with a live birth, most of the remaining third with abortion, and the remainder with stillbirth or miscarriage.⁴ Few teenage parents relinquish their children for adoption.⁵ Social policies toward unwed early parenthood and its consequences have changed markedly in the last quarter century. One outgrowth of these changes is federal legislation that for the first time focuses explicitly on teenage pregnancy.⁶ In the past, there has been much research on teenage sexuality and premature pregnancy. The impact of this research on social policy changes, however, is unclear. The authors concur with Baumeister: "Policy, as it relates to delivery of social services, has followed a wavelike rather than a linear course. We seem to lurch from one position or fad to the next, depending upon the prevailing social and political climate."⁷ This paper reviews the scope and negative consequences of unplanned early pregnancy and traces the development of federal policies affecting teenage pregnancy and parenthood. We examine social science research on teenage sexual behavior and contraception and use this research to comment on recent federal policy shifts.

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Scope of the Problem

About half of the 29 million U.S. men and women between the ages of thirteen and nineteen have had sexual intercourse.⁸ Each year one out of ten teenage women gets pregnant.⁹ Social and medical research has established a host of negative consequences following early pregnancy. Pregnant teenagers, compared with older counterparts, experience a higher incidence of anemia, toxemia, labor complications, and pregnancy mortality.¹⁰ Coitus, pregnancy, and childbearing in the teenage years are positively correlated with cervical cancer and with uterine diseases necessitating hysterectomy.¹¹ Young mothers are less likely to get prenatal care and frequently lack adequate nutrition.¹² Haphazard health care, poor diet, and immature physiology mean that babies delivered by teenage mothers suffer inordinate rates of prematurity, low birth weight, and congenital defects.¹³

Social and psychological research indicates that children of adolescents have more behavioral problems, fail more often in school, and have less intellectual ability than do offspring of older parents.¹⁴ Adolescent parents have greater marital difficulties, and their divorce rate is higher than that of older parents.¹⁵ Teenage parents are also more likely to abuse or neglect their children.¹⁶ Young parents suffer educational setbacks by quitting high school and by never regaining their lost years of education.¹⁷ Teenage mothers and fathers lack marketable skills and encounter prolonged unemployment.¹⁸ When employed, they hold low-prestige positions, express job dissatisfaction, and earn marginal incomes.¹⁹ The economic costs of early parenthood are painfully familiar to social service professionals. Half of all payments for Aid to Families with Dependent Children go to women who bore children in adolescence.²⁰ Teenage mothers are twice as likely to fall below federal poverty lines than are women who delay motherhood until age twenty or after.²¹ Annual costs to the government in medical and welfare expenditures for each teenage pregnancy are estimated at \$18,700—over \$8.3 billion for the 460,000 annual pregnancies.²²

Past Policies

Reviewing public attention to teenage pregnancy in the last twenty-five years reveals substantial changes in policies and programs. Prior to 1960, teenage pregnancy out of wedlock was considered a moral problem. A young mother's major obstacle was the social embarrassment

of not being married, hardly an appropriate target for public policy. Private maternity homes quietly sheltered white middle-class adolescents who were pregnant and unmarried.²⁴ Since legal abortion was not an option, service providers' major task was helping young mothers release their infants for adoption. Ironically, birthrates to unmarried teenagers were higher during this period (the 1950s) than at any other time in U.S. history.²⁵

Despite declining birthrates for all adolescents except those under 15, the 1960s witnessed increased interest in early pregnancy as a social problem. Experts of this era saw adolescent pregnancy as the origin of economic problems. Early parenthood seemed to trigger welfare dependency and poverty, and so it contributed to burgeoning public assistance rolls.²⁵ The problem was not one of personal morality but of public welfare. Aries recounts this shift: "During the sixties the problem of adolescent pregnancy [was] redefined as a result of growing Black protest and the policy of the Great Society. It was no longer the stigma of illegitimacy which concerned the social planners, but rather the contribution of adolescent parenthood to the poverty cycle and the inability of the service system to meet the needs of the population at risk."²⁶ Redefining adolescent pregnancy in economic terms yielded federally financed medical and family-planning programs for adolescents. With higher birthrates and carrying heavier consequences of pregnancy, black adolescents were particularly "at risk." Hospital-based programs and clinics sponsored by the Office of Economic Opportunity gave inner-city teenagers free perinatal care, sex education, and contraceptives.²⁷ Teenage pregnancy was considered a public health problem as policymakers turned to medical delivery systems for help. The rationale for these programs was rooted in public health traditions, since lack of information and lack of access to contraceptives allegedly caused teenage pregnancy, it was thought that provision of information and access to contraceptives would cure it.

Most alterations in federal policies affecting teenage birthrates stemmed from the 1960s political climate, which emphasized civil liberties. The civil rights movement redefined fertility control as a matter of individual right. New policies and legislation made significant changes in three areas important to teenagers—access to abortion, access to contraception, and the role of parents in monitoring sexual decisions and behavior. Prodded by feminists and others, the Supreme Court in 1973 ruled that women could decide not to carry a pregnancy to term. Though not aimed at adolescents, this ruling has nonetheless influenced teenage childbearing. That adolescents now account for a third of U.S. abortions illustrates the policy's impact.²⁸

Controversy surrounding legalized abortion is well known. By passing the Hyde Amendment in 1977, the Ninety-fifth Congress prohibited federal funds to "pay for abortions or to promote or encourage abor-

tions."²⁹ Early in 1980, another chapter in the abortion debate was written when Judge Dooling of New York challenged the constitutionality of the Hyde Amendment and ordered resumption of government payment for the abortions of indigent women. The high court then upheld the amendment and its funding restrictions.³⁰ Though its critics feared the worst, just how much this federal funding restriction has affected teenagers' access to abortion remains to be seen.

Policy changes affecting access to contraception and the relationship between sexually active adolescents and their parents came through court decisions on teenagers' legal rights, particularly their right to privacy. As a result of 1976 rulings, health care providers cannot require "mature" minors to obtain parental consent for contraception or abortion services. Not surprisingly, the definition of "mature" is still under debate.³¹ Special interest groups fought hard during the late 1960s and the 1970s to enact legislation allowing young people to obtain birth control without parental permission. Resulting policies emphasizing confidentiality have, albeit unintentionally, altered the traditional role of parents in deciding what is best for their teenaged children. Policy analysts from the Alan Guttmacher Institute sketch the dilemma. "Few would argue with the proposition that, ideally, parents should be involved when their young daughters seek to use powerful drugs to protect themselves from pregnancy, or seek an abortion to prevent an unplanned birth. The reality, however, is that many parents and children do not explore together the highly charged issue of sex, and large numbers of young people, sensing or anticipating opposition to their newly initiated sex lives, cannot or will not involve parents in their decision to use contraception."³²

Federal interest in teenage pregnancy and parenthood peaked in the late 1970s. In October 1978, Congress passed the first legislation directed explicitly at adolescent pregnancy. The Office of Adolescent Pregnancy Programs (OAPP) was established by Titles VI–VIII of the Health Services and Centers Amendments Act to develop comprehensive community services for pregnant adolescents and school-age parents. To a much lesser extent, the act focused on adolescents at risk of pregnancy.³³ Opposition to abortion was largely responsible for the new policy. The legislation was drafted and sponsored by the Carter administration as an "alternative to abortion."³⁴ By one account, "The final passage of the modified bill [establishing OAPP] had as much to do with the politics of the Carter Administration and the 95th Congress as the actual needs of adolescents."³⁵ The limitations of OAPP were noted from the start. Along with other government programs, OAPP has never had sufficient funding, and the act does not touch the issue of abortion for teenagers.³⁶ Its worst flaw is its failure to emphasize primary prevention. As a former surgeon general states, "Prevention is our first and most basic line of defense against

unintended adolescent pregnancies "³⁷ Without a commitment to prevention, OAPP is little more than a token effort. One federal administrator sums it up: "Many policy-makers in the Administration and the Congress as well as the general public may think that we have adequately dealt with the problem of adolescent pregnancy when in reality we have only provided very limited services for a small percentage of pregnant teenagers."³⁸ Indeed, OAPP's emphasis through 1981 was on broadening the scope of existing services to pregnant adolescents.

Evaluation of Past Policy

A decade and a half of research traces the effects of the foregoing national policy developments on teenage birthrates. Teenage birthrates have declined since 1955.³⁹ However, the proportion of babies born to teenagers and the rate of out-of-wedlock births to women under twenty have steadily increased in the past two decades.⁴⁰ While teenagers are rapidly adopting contraception, unmarried, sexually active teenagers who use birth control consistently are still in the minority.⁴¹ Abortion rates for teenagers have soared in the last few years.⁴² Even so, birthrates for women fifteen to nineteen continue to decline less than rates for older women.⁴³ Worse yet, birthrates among ten- to fourteen-year-old girls increased by a third in the last decade.⁴⁴ The last two decades have witnessed changes in the sexual behavior of American teenagers. National policy developments have had a salutary impact on teenage parenthood, but it is an impact that is mixed and not altogether positive.

In all fairness, the uneven record of these policies may result from spotty implementation. Even in liberal times, contraception and abortion were not available to many teenagers. Entire counties and metropolitan areas still lack these services for women of all ages. Legal strictures aside, hospitals and physicians continue to ask parental consent for abortions to women under eighteen.⁴⁵ Moreover, research findings note missing linkages between contraceptive services and teenage consumers.⁴⁶ Because of negative community sentiment, many such clinics keep a low profile and do no outreach.⁴⁷ Not surprisingly, scores of sexually active adolescents are unaware of local services that provide contraceptives and perform abortions.

More important, lack of access to contraceptives and abortion is but one factor contributing to adolescent pregnancy and parenthood. When ten-year follow-ups of public health service programs were completed, the results were not as expected. Even where contraceptive services to teens were exemplary, pregnancy rates did not decline. Few teenagers

requested contraceptive services. And limited gains were made in lowering health risks for pregnant teenagers, young mothers, and the babies. One research group wrote wistfully, "The crucial questions are why, despite the special program's extensive educational effort during the index pregnancy, many [teenagers] did not use contraception, and why many of those who were pregnant again did not receive adequate care."¹⁸ Other criticism was stronger: "Although family planning clinics receiving some form of federal support constitute the major source of birth control for teenagers, they are not reaching large numbers of sexually active teens nor are they reaching them soon enough—especially those who are fourteen and younger. In many cases they also fail to promote effective contraceptive use among teens they do reach."¹⁹ Results from these and later evaluations indicate that early and unwanted pregnancy cannot be explained solely on the basis of inadequate information or poor access to birth control.²⁰

Current Policies

In the present conservative political climate, sex-related policies from the 1960s and 1970s have a tenuous future. Abortion as a legal option for all women is currently in jeopardy. Department of Health and Human Services Secretary Richard Schweiker once sponsored a constitutional amendment outlawing abortion. Early in his appointment he said he would use his office to advocate against abortion.²¹ Even with the majority of Americans in support of the right to abort, the medical procedure is a controversial political issue. Renewed public funding for teenage abortions is not likely.²² A Senate bill introduced by Jeremiah Denton and Orrin Hatch proposes an amendment to the act establishing the Office of Adolescent Pregnancy Programs. The amendment's intent is "to promote self-discipline and chastity, and other positive, family-centered approaches to the problems of adolescent promiscuity and adolescent pregnancy."²³ Promiscuity is defined as nonmarital coitus. Though not entirely abolishing federal funds for sex-related services to teenagers, the amendment stipulates that any federally funded entity must obtain parents' permission to provide contraceptive or similar services to youths dependent on their parent. Federal officials recognize that some teenagers will continue to have intercourse but not risk requesting contraceptives when they know their parents will soon find out.²⁴ The rationale behind this policy shift was stated by Secretary Schweiker: "Instead of building this Berlin Wall between mother and daughter, parents will be forced to fac

[their child's sexuality], confront it, and deal with it."⁵⁵ As might be expected under this so-called Chastity Bill, service providers may not give abortion counseling or referral, pay for an abortion, or do any research related to abortion.

Recent OAPP priorities reflect this conservative return to the family as the regulator of teenagers' sexual behavior. A March 1982 OAPP program announcement seeks "effective means, within the context of the family, of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members, and to promote self-discipline and other prudent approaches to the problem of adolescent premarital sexual relations, including adolescent pregnancy."⁵⁶

The shift from political liberalism to the New Federalism, deregulation, and private initiative makes it almost inevitable that the emphasis on pregnancy prevention will be through parental, not governmental, involvement. Nonetheless, early effects of this shift are not encouraging. The possibility that parents might be notified has caused a drop-off in teenagers' requests for birth control at family planning centers. One research group confirms that, if parents must be notified, 26 percent of sexually active teenagers would not apply for contraceptives and only 2 percent would stop sexual activity.⁵⁷

Other findings from social research are useful in assessing the probable effects of current policies. Such research addresses developmental tasks of adolescence, what adolescents need to prevent conception, and how likely they are to get what they need from their parents.

Social Science Findings

The three critical developmental tasks of adolescence are well known: separating from parents, learning sexual behavior, and deciding on a vocation. The fact that teenagers engage in sexual experimentation is no mystery. The mystery is why, even when they have knowledge of and access to contraception, teenagers persist in unprotected intercourse and become pregnant. Some social scientists have tried to isolate psychological pathologies causing early pregnancy. Conflictual family relationships have been examined, as have youths' underdeveloped superegos, low self-esteem, and a host of intrapsychic phenomena.⁵⁸ No consistent patterns or results have emerged from these studies.

Other research posits that social inequities and indistinct social roles are the true causes of teenage pregnancies. Fischman and Palley see

early conception stemming from the woman's recognition of her slim chances for educational and career achievement. This recognition results in compensatory enhancement of precocious sexual fulfillment, pregnancy, and parenthood. Therefore, "Reducing the incidence of illegitimate pregnancy and teenage motherhood requires an attack on the specific conditions of poverty to which the young girl is adapting."⁵⁹ Klerman agrees that teenagers will effectively control their fertility only when they have meaningful roles and satisfying jobs.⁶⁰

More recent scientific efforts have looked at cognitive and behavioral abilities required for teenagers to use birth control.⁶¹ Use of birth control demands that teenagers anticipate sexual encounters, curb impulsive responses, seek out needed information, and apply this information to their own behavior.⁶² They must also have the interpersonal skills to obtain birth control devices and to communicate about contraception with sexual partners.⁶³ Normal development, however, offers young people few opportunities to acquire these crucial skills. Following Piaget, many scholars regard adolescence as a transition from concrete to formal-operations thinking.⁶⁴ One aspect of formal-operations (adult) thinking is the ability to anticipate future events and to plan ahead. Contraception obviously requires such premeditation. When abstract thinking is not well developed, teenagers literally do not think to contracept.

Immaturity adversely affects contraception in other ways. Ambivalence and confusion about premarital sex impede the transition from petting to full sexual intimacy. As one research group points out, "Since using birth control consistently involves planning, preparation and admitting one's sexual activity, many adolescents find it more comfortable to bridge the values gap by being 'swept away' or 'overwhelmed' into 'spontaneous' sex, thus avoiding the negative implications of 'premeditated' sex. By not dealing consciously with the possible outcomes of their actions, they are able to remain acceptable both to their peers and, on some conceptual level, to their parents."⁶⁵ Research confirms adolescents' denial of their sexual behavior and illustrates why they find contraception difficult.⁶⁶

Contributing to this denial process is parental shyness about openly dealing with sexual issues. When it comes to birth control, formal socialization falters. Despite our society's increased openness about sexual behavior, teenagers today still receive little realistic preparation for sex, let alone for contraception. Certainly, young people are inexperienced in making difficult choices and in handling interpersonal complexities. When choices involve sex and contraception, regular channels of socialization—schools, peers, the media, and parents—offer little assistance. Schools stay away from delicate topics. At best, schools have taught abstract rudiments of human reproduction. At worst, schools are the place where peers teach each other erroneous

information.⁶⁷ The media tout sex constantly but unrealistically. Rarely do songwriters, actors, or advertisers associate sex with contraceptive responsibility. Finally, research documents the vast silence in the majority of American families regarding sexual attitudes and behavior.⁶⁸ Some parents hand down objective facts about sex, but they seldom show their children how to integrate these facts into consistent attitudes, problem-solving processes, or actual behavior.

Parents, in fact, may be uniquely unsuited to providing the kind of sex education teenagers require. Most parents have little to draw on from their own backgrounds to prepare for sexual instruction. They came of age in sexually conservative times. And they learned about parenting from their own parents, who, twenty-five years ago, were not likely to have had open, informative discussions of sexual concerns. Many parents feel that their children already know far more than they about venereal disease, masturbation, homosexuality, and all forms of "getting off" sexually.⁶⁹ Parents are very often afraid to share their values about sex for fear of alienating their youngster by appearing old-fashioned and out of touch. In the vicissitudes of middle age, parents may be uncertain whether they dare impose values on their child that they do not observe in their own sexual relations.⁷⁰

In sum, reliable, useful instruction about sex and birth control is in short supply for teenagers and parents alike. Even when available, good information is not helpful if adolescents lack the skills to use it in their everyday behavior. Because of cognitive and behavioral immaturity, all adolescents should be viewed as vulnerable to unwanted pregnancy. Efforts to identify and cure a particular high-risk group are misdirected. Knowledge of biology and contraceptive theory will not give adolescents the impetus to overcome deficient skills, embarrassment, or denial mechanisms that keep them from using birth control. Hence, policy that sponsors only wider access to contraception will fall short of the mark. Something more is needed. Projects undertaken in the last five years offer concrete and feasible guidelines for improving contraception rates among adolescents. A program developed by the authors teaches specific problem-solving and communication skills to young people and gives them practice in resolving difficult choices and interpersonal problems involving sex.⁷¹ Mixed-sex groups of adolescents examine typical situations involving sexual behavior. Group members outline options for resolving the situation, discuss the consequences of each option, choose the option they think fits them best, and rehearse how to implement the option in real life. Tested in public schools, this skills training approach has demonstrated promise in reducing incidence of unprotected intercourse.

Another successful prevention endeavor comes from the school system in St. Paul, Minnesota.⁷² This project established clinics offering sex-related and other services to students in two high schools. Teenagers

had on-campus resources staffed by social workers, nurses, and doctors for pregnancy testing, contraception, and treatment of sexually transmitted diseases. Data from the project show 75 percent of the study body requesting services, one in four wanting birth control. At a 1½ year follow-up, 87 percent of the requesters were still contraceptive. This school-based service yielded a 40 percent decline in unintended student pregnancies.

Directions for Future Policy

Social science research suggests effective procedures for improving pregnancy prevention. The most obvious vehicle for wide-scale application of these programs is the public school system. Cost considerations favor schools as centralized networks for health education and services. Schools also remain as the best mechanism for reaching parents. Besides sending parents information and conducting workshops for them, school-based efforts could involve parents as member advisory boards and as volunteers and classroom aides. No one denies that schools are efficient sites for large-scale prevention. The concept of sex education in schools is hardly new, but use of schools for this purpose is widely debated. Policymakers and school officials generally treat sex education as too volatile a subject. Most parents support the idea of school-based sex education, but only a few are willing to work for such programs.⁷³

Political opposition to school sex-related programs and services springs from three assumptions. Oldest is the myth that open discussion of sex encourages experimentation, heightens sexual activity, and becomes the "indoctrination of youth into promiscuity."⁷⁴ In fact, the opposite is true. Open discussion makes sexual behavior explicit and encourages teenagers' awareness and acceptance of their own sexuality—a necessary prelude to sexual responsibility. When their sexuality is taken seriously and relevant discussion and instruction occur, adolescents postpone intercourse and use effective contraception when they become sexually active.⁷⁵

The second opposition to school-based sex education assumes school personnel cannot do the job.⁷⁶ This opposition is less easily dismissed. Policy promoting school-based prevention must grapple with how instructors and support personnel will be selected, prepared and evaluated. Because of cutbacks and tightening budgets at the state and federal levels, trends are toward basic curricula and away from nonacademic courses and pupil services. Few funds are b

allotted for inessential classes on the prevention of social and health problems. Research findings aside, political and financial conservatism is discouraging school districts from feasible and effective sex-related services.

The third opposing assumption is that parents are the only appropriate sex educators for their children. This assumption is increasingly visible in key members of the Reagan administration. Yet, if parents become the crux of future pregnancy prevention policies, they must have more assistance in assuming their sex educator role. Again, social science offers guidelines. Parent-adolescent communication about sex can be greatly enhanced through information and skills training classes for parents. For example, while sexuality classes for adolescents were in progress, two researchers offered identical but separate classes for parents. Parents attending these classes were far more able than non-attending parents to hold concrete, personal discussions with their teenagers on complex sexual matters.⁷⁷ With the conservative movement away from government responsibility for sexual instruction of the young, schools may not become the focal points they might be for parent education about sex. Parent training efforts will probably need the sponsorship of other youth-serving agencies such as boys' and girls' clubs, 4-H clubs, and YMCAs. Churches may also be called upon to fill the need for sex education assistance for parents.

Summary

Policies affecting teenage parenthood have shifted in the last quarter century. These shifts resulted from changes in intellectual and political values rather than rational planning or guidance from social research. Contraception, pregnancy, and birthrates among teenagers responded positively to policies making abortion available and excluding parents from birth control negotiations. Despite social science evidence against it, a shift away from public involvement back to family and individual responsibility for sexual behavior is in the offing. Future policy and research on teenage pregnancy needs to devise methods for bridging the gap between government and family responsibilities in the transmission of sexual values and in the monitoring of adolescents' sexual behavior.

Notes

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Accountability and Pseudo-Accountability: A Nonlinear Approach

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The relationship between more effective service and more precise measures of accountability for cost, quantity, and quality of service is curvilinear rather than linear. At various points in different organizations, the political, technical, economic, and social constraints imposed on agencies by poorly designed accountability systems result in a redistribution of rewards that over time leads to less effective service and a curvilinear relationship between service effectiveness and accountability. Accountability mechanisms can nevertheless encourage better service if they are designed to promote organizational problem solving.

The process of accountability involves (a) establishing a set of role relationships that detail who is accountable to whom, for what, both within and without an organization; (b) utilizing methods and procedures through which an accounting is given to the responsible parties that standards of effort, effectiveness, and efficiency have been met; and (c) redistributing rewards and costs that accrue during the accounting process.

The mythic belief in the value of accountability systems for social welfare rests on the assumption that the only possible consequence of accountability is better service and that there is a direct linear relation between more effective service and more precise measures of accountability for cost, quantity, and quality of services. This article contends that this relationship is not linear but curvilinear since at various points in different organizations, attempts to insure more control over procedures and results lead to less effective service.

This article describes the reasons for the curvilinearity as well as the major limitations of accountability. It suggests the need for a reappraisal of the value of accountability and a respecification of its negative as well as positive potential. Notwithstanding this, it contends that accountability can have an effect on better service if a model is utilized that pays attention not only to structure and procedure, *a* and *b* above,

but also to *c*, the redistribution of rewards and costs that affect an agency and its staff's response to accountability, for better or worse. This redistribution is simultaneously imposed on an agency by the standards enjoined by outside bodies to which it is accountable and by the way the agency operationalizes its accountability system.

Accountability in the 1960s

A brief overview of agency and worker attitudes toward accountability highlights the effect on them of redistributions of rewards and costs. The movement to make agencies more responsive to client needs in the 1960s resulted in an increase in tension between agency administration and staff. Scott illustrates this by providing several scenarios of the mismanaged facility and the reformist employee.¹ He notes that most workers, after going through a period of learning their jobs, then make attempts at suggesting how their organization might be more effective. If ignored, some give up quickly, while others, after a time, tend to accommodate waiting for promotion. There are some who continue the struggle, yet even they, when dissatisfaction mounts beyond their personal level of tolerance, leave and find other jobs.

At various times such workers were urged to develop particular adaptations to their concerns. The supervisor would assure the workers that they were entitled to their own feelings, but that policy must be followed. Simultaneously, workers were subtly admonished by their supervisors that constant challenging of authority indicated a personality problem. The tacit message was that accountability for agency policy is "none of your business." The implied costs are clear.

Another response urged on workers was a more professional one. Supervisors attempted to show workers that agency policies that on the surface appeared to be contradictory to professional norms were in fact consistent with them. For example, the enforcement of the responsibility of relatives as an eligibility condition for welfare was defended under the thesis that such a policy promoted family stability. The hardship aspect of the policy was obscured. The message was that the agency could hold itself accountable, it really knew best.

Another approach was political in nature. There, the rules and regulations were bent. The supervisor looked the other way and the worker did what he thought should be done. This approach sidestepped problems and never actually confronted them. It often created a kind of conspiratorial atmosphere that tended to implicate everyone in a "cover-up" and thus put limits on the ability to act. There accountability

was viewed as an impediment; protection and security were more important.

Increased risks.—Beginning with the War on Poverty, there was a sharp reaction to such conceptions of accountability.² Different approaches were taken. Some were quite innovative and bold, such as client advocacy. Each worker was to be in effect an advocate or ombudsman, even at the risk of personal or agency conflict. Clients were organized to bring political pressure on the bureaucracies. Sit-ins, confrontations, boycotts, and marches were the order of the day.

The message was that lower-level workers and clients could hold the agency accountable. The problem with this view was that it assumed that the interests of the worker and the clients were identical. Many workers were not willing to risk their jobs. The cost was too high. Many had a vested interest in agency survival.³ Many clients were not interested in helping other clients; they were merely interested in securing services for themselves. Once these concerns were secured, their interest in client organizations waned.

What seems to have been ignored is that organizations are able to absorb more tension than most individuals and that they are hierarchically structured for this purpose. In many situations new organizational structures and ways of handling tension are needed if tension from clients and staff is to be utilized to promote accountability.

Increased responsibility.—To a certain extent, the attempt to encourage participative management was directed at the issue of tension management. Hierarchies were to be flattened, and lower-level staff were to be included in decision making. Human relations theories were to extend to the workplace and would insure accountability.

Notwithstanding the value of such an approach, it was extremely difficult to operationalize. In large organizations with unstable, turbulent environments, multiple and often conflicting goals, and a professional staff with varying training and values, basic restructuring cannot even be minimally successful in the short run without the presence of sophisticated leadership to handle inevitable role confusions.⁴ Such leadership was often absent. In its absence, human relations theorists were overly optimistic about the possibility of insuring accountability through restructuring and reorganizing.

Increased complexity.—In addition to hopes attached to participative management, a policy and programmatic view developed that was equally optimistic but in a different direction. It held that if a program were designed perfectly, for example, to ensure adequacy, comprehensiveness, and accessibility, and evaluated appropriately, it would insure accountability for effective services, no matter how diverse the services, how decentralized the administration, or how dispersed the locations.⁵ The major flaw in the programmatic view that emerged in the 1970s was the inability to account for the organizational context

in which programs operated. In this flawed programmatic view, service was the sole focus of the design. What was good for the client was assumed to be good for the agency and the staff. This congruence was far from absolute in reality.

An agency must devote some of its resources to stability and survival, some to the maintenance of staff morale, and some to adjust itself to its ever-changing environment. These concerns make it impossible to design programs solely on the basis of client need. Program design is constantly in danger of missing the forest for the trees if it focuses solely on service goals and ignores staff and agency survival needs and treats them as illegitimate ends."

The proponents of programmatic and "bottom-up" organizational change as the key to accountability in the 1960s lost their momentum as the 1970s unfolded. Part of the reason for this was their inability to see accountability as a social process that redistributes rewards and costs to all who are affected by change. The necessity of factoring out the consequences of such redistributions for the operation of organizations eluded them. They overestimated the rewards and underestimated the costs of a simultaneous rise in tension, risk, complexity, and responsibility.

Accountability in the 1970s

In response to the unprecedented efforts of the 1960s, a number of writers in the 1970s attempted to conceptualize the staff role in organizational change. Such persons as Patti, Brager, Specht, and Weisman have utilized a conception that distinguishes between strategy and the overall plan for change, and tactics, the various maneuvers one engages in to achieve proximate ends.⁷ In their writing, rational, collaborative, and adversary strategies are related to an array of potential tactics.

Yet even in the relatively short period of years that this literature has been available, a critique of these "bottom-up" efforts at change has developed.⁸ The critiques point out that the interplay of cultural, personal, organizational, and situational variables is so complex and intermeshed that rational planning from "top down" and even more so from the "bottom up" is a complex enterprise.

Second, it is likely that some of those at the lower organizational rungs, like some of their higher-up counterparts, will be rigid about their innovations, blind to the concerns of others, and unresponsive to client needs that conflict with their ideological or professional biases.

Lower-level staff need checks and balances, at least as much as those at the top.

Third, the literature on "bottom-up" change is criticized as being too concerned with strategy and tactics and not concerned enough with the structural requisites of an agency that promote efficiency and effectiveness, such as mechanisms to utilize tension to promote change. In other words, staff cannot really plan change unless they know a priori what the structure of an effective agency looks like.¹⁰ Change agents are not substitutes for systems oriented toward change.

While some critics were concerned about improving the techniques of "bottom-up" change, others took the position that this was a misdirected effort. For these writers, the key to accountability was not more staff involvement, but more and better accountability, from the top down. The writers and proponents of "bottom-up" change were drowned out by a chorus of "top-down" articles in the 1970s.¹¹

More efficiency—less effectiveness.—The prescriptions usually offered in such articles included utilizing systems analysis, hiring business-oriented managers, using new and sophisticated technology, and employing scientific research. One conceptual flaw with these prescriptions was their exclusive focus on procedures and techniques.

Initially the differences between business organizations and not-for-profit organizations were ignored. When products do not sell, an alarm of some sort usually goes off in a business. Yet the success or failure of social programs in most instances cannot be directly related to profits. The business manager used to having profits as a guide is usually lost without them. He confuses efficiency with effectiveness, making accountability synonymous with efficiency. Social programs, however, can never be judged solely on fiscal considerations.

In the absence of profits, business-oriented managers looked for help from scientific management, with its array of techniques: Program, Evaluation and Review Techniques (PERT), zero-based budgeting, management information systems, operations research, management by objectives, each surrounded by an army of consultants, were available.

Yet these techniques are limited. Aside from the difficulty of adapting them for use in the nonprofit organization, they cannot, in the short run, do away with confusing conflicts, such as whether drug addiction is a disease or a crime, or whether welfare causes dependency or is a symptom of a sick economic system. They also cannot tell one how to cure an addict, reduce dependency, or teach.

More control—less support.—Another major flaw in the accountability emphasis of the 1970s was the assumption that if an organization has techniques in place to control for quality, quantity, and cost, that organization will be accountable and more effective. Yet, accountability has potential for misuse. Measuring the achievement of objectives can become a tool simply for control in the hands of a rigid and frightened

administration. But accountability when focused solely on control may merely increase tension by pointing out discrepancies. Without institutionalized ways of handling such tension that allow the emergence of creative solutions to problems and discrepancies, accountability systems will not promote better service.

Administrators should know the results and effects of their agency efforts. To improve on these results, they must also be aware of (1) tension generated in clients deriving from discrepancies between what clients expect and what they receive, and (2) tensions generated in staff resulting in differences between what they are asked to do and what they think they should do.¹¹ To utilize this information, accountability systems must be supported by organizational communication systems that make it possible for organizational members to communicate to each other the reasons for the tensions and pressures each operate under.

When such tensions are not shared, it is unlikely that the means and supports for "doing better" will emerge. Accountability systems tend to be seen as another obstacle by workers who quite accurately realize that they are not a source of potential rewards.¹² Indeed, there is evidence that accountability procedures exacerbated problems of worker stress and burnout in the 1970s as severe limitations were placed on staff discretion and flexibility.¹³ Paperwork, restrictions on the length and duration of services, and a short-term view of cost-effectiveness probably lessened the margin that enabled workers in the past to handle tension informally and maintain their effectiveness.

Accountability in the 1980s

At a minimum, those concerned with accountability in the 1980s should learn from past experience. At present there appears to be a polarizing of opinions. At one extreme are those who see accountability as a hoax—a Trojan horse whose hidden purpose is to indict social workers for their concern for clients and at the same time to cut costs no matter the human consequences. At the other extreme are those who see strict accountability as the only means of recouping public support for social programs.¹⁴

Both extremes share a similar view about the nature of organizations—that they are rationally constructed entities designed to achieve some specifically intended purpose. Yet everyday experience and a good deal of research suggest that this is only partially true. Perrow's comment that Lockheed is a pension plan that incidentally produces airplane

seems more to the point. He suggests that there should be a "user" view of organizations. The clients use social agencies for one purpose, the staff for another, society for another, political parties for another, and professions for another.¹⁵

Political constraints.—How does one hold such an entity accountable? "Who is accountable to whom for what" is continually being negotiated. The aims of various "users" are partially contradictory. The negotiated order that results inevitably means that accountability is essentially a political process and not an objective administrative one.

This political process is one of the main reasons for the curvilinear relationship between accountability and service. As one or two user-groups impose their priorities, other ends suffer. Focusing on cost can limit the attention paid to quality, focusing on quality can limit attention paid to quantity, and so forth.

Strict accountability requirements that heighten political struggles among user groups can limit organizational discretion, cooperation, and flexibility. If point 5 on figure 1 (marked by an X) represents the optimal balance between accountability and cost-effective services, power struggles deflect an agency from reaching such a standard. Services tend to decline as the emphasis on a particular focus of accountability increases internal tension (marked by Y).

Technical constraints.—Another source of curvilinearity results from the deflection of effort from providing services to insuring accountability. Some thought should be given to the time required for agency staff to follow mandated procedures, to potential overlap and duplication of procedures, and to the consequences of overmeasurement.

Etzioni makes the point that "the distorting consequences of over-measuring are larger when it is impossible or impractical to quantify the more central, substantive output of an organization, and when at

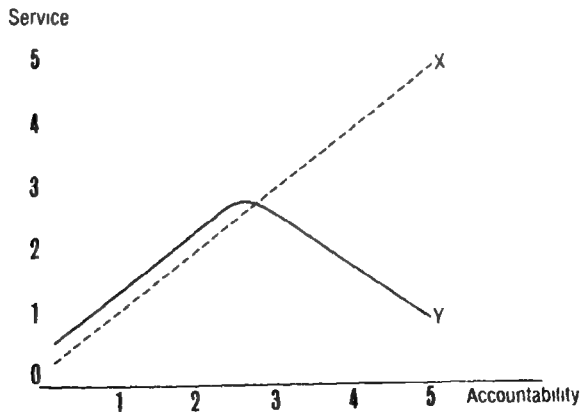


FIG. 1—Relationship between accountability and service

the same time some exterior aspects of the product, which are superficially related to its substance, are readily measurable."¹⁶

The overmeasuring of means such as the number of hours of treatment, rather than ends or the results of treatment, has the effect of encouraging rigid adherence to mandated rules and regulations for their own sake, no matter what the consequences to clients. This always present organizational danger is a major factor contributing to the curvilinearity of the relationship between service and accountability.

Economic constraints—Another contributing factor and major source of deflection from service objectives is caused by the adversarial relationship of agencies to organizations and groups that hold the accountable. If agencies feel their survival threatened, they will be constrained to show more progress in the records than exists in reality, restrict their intake to those with whom success can be best assured, and alter their service objectives to meet the criteria of measurement rather than client need. What is required is a state of healthy tension between agencies and watchdog groups—where there is mutual recognition of differing, yet legitimate, perspectives and interests.¹⁷ Unfortunately, the relationship is often adversarial, which results in a kind of pseudo-accountability, where both parties cover themselves against criticism, but service is not improved.

Regulatory groups, funding bodies, and boards of directors need to know what is happening, at what cost, and at what degree of effectiveness. Staff and administration need to know this as well, but they also need to know how they can do things better. For example, accrediting bodies such as state departments of health or accreditation councils such as the Joint Commission on Accreditation of Hospitals are ideally suited to promote the advancement of knowledge and better service. The danger is that they will narrowly conceive of their role as one of assuring compliance with standards. Rather, they should use their information-processing systems and the data they produce to analyze the factors that promote an agency's ability to be successful.

In the 1980s, such accrediting bodies should be held responsible for helping to develop better ways of achieving success as well as simply measuring it. Accountability systems can alert agencies to problems in funding, staff competence, agency structure, or knowledge base, but they cannot help provide the answers to these problems unless they are specifically designed to do so.

Social constraints.—When the negative consequences and costs of accountability include constrictions on time, resources, flexibility, or discretion, answers will seldom emerge. In this vein, Brown contends: "The operationally important form of accountability is the mixture of formal devices and conventions, rooted in our political culture, for publicizing the workings of a system, so that those who are interested can spot errors and imbalances and appeal to constitutional rules at

cultural norms to have them put right. The touchstone is perhaps neither formal accountability nor participation, but openness.¹⁹ Without this "openness" it is unlikely that any agency can discover the optimal point where accountability supports better services.

Yet, as already noted, when an agency's survival is threatened by accountability, defensiveness rather than openness tends to be the rule, certainly in the agency's external relationships. What is seldom recognized is the extent to which an agency's internal social relations are affected by accountability mechanisms. In an attempt to improve service by imposing more and more accountability procedures, changes are imposed on the existing reward system. The fit between the technical service delivery system and its accompanying social-psychological system is disrupted.²⁰ Workers can feel robbed of a sense of completion in finishing a meaningful unit of work if there is more concern with meeting statistical quotas than with results.

Rewarding work relationships with those performing related tasks are disrupted if there is rigid insistence on meeting arbitrary objectives. Formality replaces informality, and conflicts that have been muted rise in tenor. Self-protection rather than openness becomes the more rewarding posture for staff, with an attendant further effect on the curvilinearity of the relationship between service and accountability.

A Problem-solving Model

Accountability is a process designed to ensure that agencies carry out the intentions of those who have legally constituted authority over them.²¹ The quest for accountability is a response partly to disagreement over who and what these authorities represent, and a response partly to potential biases associated with the discretion given or taken by agencies in interpreting or carrying out their mandate.²²

In this paper the argument has been made that such mandates are not fixed but are constantly being negotiated as many different groups claim authority over the agency—funding sources, legislative bodies, client groups, boards of directors, accrediting bodies, unions, and the like. It has further been argued that these political struggles, as well as the technical, economic, and social constraints imposed on agencies by traditional accountability systems, result in a redistribution of rewards that over time creates a curvilinear relationship between service effectiveness and accountability.

This paper contends that while some degree of curvilinearity is inevitable, the exact point where service effectiveness and accountability

efforts diverge can be affected by processes that promote organizational flexibility and openness. The problem-solving model implied in this paper does not implicitly reject the traditional call for fiscal, personnel, and program accountability. It recognizes the need for clear standards and standards, and accepts that there is considerable work to be done in this area. Nevertheless, it rests on a different set of values and behavioral assumptions related to these standards than the traditional ones. These assumptions bear repeating.

First, no matter what standards of outcome or process are chosen, there will be conflicts. Equity cannot be obtained without some sacrifice in efficiency, procedures cannot always be followed without some sacrifice in effectiveness.²⁴ Thus standards of effectiveness, for example, cannot be defined *a priori* for any particular agency, but must be negotiated on the basis of experience with trade-offs among such various standards as adequacy, equity, efficiency, and the like. The critical issue is that the consequences of these trade-offs be understood and debated. Is more of one related to less of another?

This means that accountability mechanisms must be designed in an arena in which various interests will contend.²⁵ Some will be concerned about equity, others about efficiency and the like. Any system provided by the accountability system must reflect the multiple standards and standards chosen in order that factual parameters, to the extent that they can be derived, can be placed on the inevitable debate that ensues. These data can enable administrators partially to control the agenda of these debates.

A second assumption is that there is a qualitative difference between "being held accountable" and "holding oneself accountable." Prior experience in the 1960s and 1970s shows that no matter how one organization tries to hold another accountable, the "bottom line" is the willingness of the accountable agency to be held accountable. They have innumerable opportunities, as already noted, to subvert the process.²⁶

Without trust between the accountants and those who are held accountable, manipulation and subversion can be expected. Trust can more easily be developed if the accountability techniques utilize methods designed primarily to help agencies and their staff do a better job rather than simply to control the way they do it. If the former is the focus, different questions will be asked and different stances taken than with the latter. One way for accountants to instill trust is to begin by admitting that no one has enough knowledge in certain situations about how to attain certain goals (i.e., cure schizophrenia or drug addiction), and that a partnership between them and the agency is required if progress is to be made.²⁶

A third assumption is that if accountability is to promote a problem-solving approach, there must be appropriate rewards to organizations

and their staffs for demonstrating the openness and flexibility required. This means that the precise mixture of rewards and costs should not result as an unplanned by-product of fiscal, process, or program accountability but be planned, to the extent possible, to support the agency's efforts to operate effectively given its constraints.

For example, overmeasurement, threats to job security, and lack of fit between an organization's technological system and its social system are all costs that can result in the debasement of services that is the ultimate subversion of the accountability system. How can overmeasurement be prevented, how can threats to agency survival be lessened, how can staff be given a sense of fulfillment for a job well done? The designers of accountability systems have to ask themselves these questions as well as ask the same questions of those they hold accountable. Nothing would go further toward establishing trust than asking such a set of questions.

A fourth assumption is that the desire for precision in accountability leads to measuring only those factors that can be measured precisely. There will have to be multiple indices of success in most programs. For example, while the recidivism rate of ex-offenders can be measured and is important, this rate cannot be the only index of success for a probation department. If it is, some sort of manipulation will occur, since the rate of recidivism is affected by many factors outside of the control of the probation department, such as the availability of jobs and the like. No department or agency will allow its survival to be threatened by unfair criteria.

Judgments will have to be made about indicators of success that cannot be precisely measured. As judgments and experience cumulate, it should be possible to develop better indicators. From this vantage point, a poor indicator is better than none at all.

Finally, any serious attempt at making accountability serve as a tool for problem solving must include some means of getting feedback from clients. They may have a perspective on how service might be made more effective that differs significantly from that of professionals. Client dissatisfaction can be a critical factor in changing social agencies, since such dissatisfaction challenges the client-centered values of the helping professions.²⁷ Yet paradoxically, the client in most agencies has the least power of any of its participants. Without an organized system of feedback, client interests will often not be effectively advanced.

On the other hand, Wildavsky is pessimistic about the effect of client feedback, as well as about the possibility of accountability mechanisms serving a problem-solving function. He suggests that ongoing organizational self-evaluation would create both external political problems and internal disruption because of the need for constant change in policy and procedures. Too much behavioral change would be required, too much conflict would be engendered.²⁸

The model of accountability he implies is a political one, where agencies are held accountable for implementing the values and goals of particular interest groups that gain ascendancy over them. If a problem-solving model does not have to be viewed as antagonistic to this model in an either-or fashion. Most likely both are needed.

The political model alone could lead to program emphases related more to the existing balance of power among organizational participants than client need. The problem-solving model alone might lead to narrow technical evaluations of program efficiency and effectiveness to the exclusion of broader social goals. But as Rosenbloom notes, "public agencies are political to the core, and efficiency and effectiveness are not high ranking political values. Power, responsiveness, and representation, by contrast are central items on any political agenda."

As these latter concerns become more and more important, as social services are increasingly funded from public sources, the problem-solving model makes it possible for administrators to keep efficiency and effectiveness on the political agenda. Even granting the primacy of political processes related to accountability, knowledge and information are important political resources. Without the data provided by accountability mechanisms that offer leads on how to do a better job, efficiency and effectiveness are more likely to become simply football used by one interest group or another to gain temporary advantage.

The argument of this paper is that such unchecked political struggles are partly responsible for the curvilinear relationship between service and accountability. The problem-solving model, buttressed and supported by appropriate organizational rewards, can be viewed as potential counterforce. Only experience can tell the extent to which it will be successful.

A combined political and problem-solving model should include: (1) negotiating what outcomes are expected; (2) making trade-offs between outcomes to establish priorities; (3) establishing acceptable levels of attainment for each outcome; (4) developing indices of success; (5) creating a feedback system between staff and clients; (6) maintaining the organizational balance of rewards and costs that support staff openness and flexibility; and (7) measuring and evaluating results in terms of the need for different goals, structures, and processes, both in the program and accountability mechanism.

This combined model of accountability, given its parameters, would have to reflect a broad view of social programs and agencies. It could not easily ignore questions about the accountability of whole service systems (i.e., child welfare) while simply focusing on individual agencies and programs since agencies and systems are interconnected. It would have to utilize technical methods such as program evaluation techniques to measure efficiency and effectiveness, as well as utilize social at

political structures, such as fair hearings and the like, to insure responsiveness and equity for various groups.

As such it would mirror the tension in society over who is responsible for what, what should be decided where, what is a professional issue and what is a lay issue, and what should be subject to public scrutiny and what should be left to private concern.¹⁰ It cannot be otherwise if it is to be social accountability, and as such it will not be neat or perfect.

Notes

I wish to acknowledge the assistance of Irwin Epstein in providing a critique of an earlier draft of this paper.

1. W. Richard Scott, "Professional Employers in a Bureaucratic Structure: Social Work," in *The Semi-Professions and Their Organizations*, ed. Amitai Etzioni (New York: Free Press, 1969), pp. 120-21.

2. See Irwin Epstein, "Professional Role Orientations and Conflict Strategies," *Social Work* 15 (October 1970): 87-92.

3. See Hettie Jones, "The Use of Indigenous Personnel as Service Givers," in *Individual and Group Services in the Mobilization for Youth Experience*, ed. Harold H. Weissman (New York: Association Press, 1969), pp. 62-73.

4. See William Gomberg, "The Trouble with Democratic Management," *Trans Action* (July-August 1966), pp. 30-35.

5. For a detailed analysis of this issue, see Carroll Brodsky and Robert Platt, *The Rehabilitation Environment* (Lexington, Mass.: D.C. Heath & Co., 1979), and Harold H. Weissman, "Toward a Social Psychology of Program Design," *Administration in Social Work* 2 (Spring 1978): 3-14.

6. See Amitai Etzioni, "Two Approaches to Organization Analysis: A Critique and a Suggestion," *Administrative Science Quarterly* 5 (September 1960): 257-78.

7. Rino Patti and Herman Resnick, "Changing the Agency from Within," *Social Work* 17 (July 1972): 48-57; George Brager and Harry Specht, *Community Organizing* (New York: Columbia University Press, 1973), pp. 261-83; Harold H. Weissman, *Overcoming Mismanagement in the Human Service Professions* (San Francisco: Jossey-Bass, Inc., 1973).

8. Lawrence Lewin, "Review of Overcoming Mismanagement in the Human Service Professions," *Social Service Review* 48 (December 1974): 609-10.

9. Harold H. Weissman, "Fantasy and Reality of Staff Involvement in Organizational Change," *Administration in Social Work* 6 (Spring 1982): 37-45.

10. Edward Newman and Jerry Lurem, "The Crisis of Accountability," *Social Work* 19 (January 1974): 5-16.

11. See Harold H. Weissman, *Integrating Services for Troubled Families* (San Francisco: Jossey-Bass, Inc., 1978), p. 92.

12. *Ibid.*, pp. 84-94.

13. See Christina Maslach, "Burned-Out," *Human Behavior* 5 (September 1976): 16-18.

14. Chauncey Alexander, President, Institute on Management/Administration, "The Social Work Perspective" (presented at the NASW Professional Symposium, Philadelphia, Pennsylvania, November 18, 1981).

15. Charles Perrow, "Demystifying Organizations," in *The Management of Human Services*, ed. Rosemary Sarri and Yeheskel Hasenfeld (New York: Columbia University Press, 1978), pp. 105-20.

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16 Amitai Etzioni, *Modern Organizations* (Englewood Cliffs, N. J.: Prentice-Hall, Inc., 1964), pp. 9-10.

17 For a discussion of the problems of board functioning, related to composition, decision making, and structure, see Weissman, *Integrating Services for Troubled Families*, pp. 60-75.

18 See Harold H. Weissman, "Accreditation, Credentialing, and Accountability," *Administration in Social Work* 4 (Winter 1980): 41-52.

19 R. G. S. Brown, *The Management of Welfare* (London: Martin Robertson, 1975), p. 278.

20 Daniel Katz and Robert Kahn, *The Social Psychology of Organizations* (New York: John Wiley & Sons, 1968), pp. 433-35.

21 Michael Baer, "Interest Groups and Accountability: An Incompatible Pair," in *Accountability in Urban Society*, ed. Scott Greer, Ronald Hedland, and James Gibson (Beverly Hills, Calif.: Sage Publications, 1978), p. 217.

22 Stephen H. Tindler, "Administrative Accountability, Administrative Discretion, Accountability, and External Controls," in *Accountability in Urban Society*, ed. Scott Greer, Ronald Hedland, and James Gibson (Beverly Hills, Calif.: Sage Publications, 1978), p. 182.

23 David Rosenbloom, "Accountability in the Administrative State," in *Accountability in Urban Society*, ed. Scott Greer, Ronald Hedland, and James Gibson (Beverly Hills, Calif.: Sage Publications, 1978), p. 109.

24 Scott Greer, "Professional Self-Regulation in the Public Interest: The Intellectual Politics of PSRO," in *Accountability in Urban Society*, ed. Scott Greer, Ronald Hedland, and James Gibson (Beverly Hills, Calif.: Sage Publications, 1978), p. 51.

25 See Michael Lipsky, "The Assault on Human Services: Street Level Bureaucrats, Accountability and the Fiscal Crisis," in *Management Systems in the Human Services*, ed. Murray Gruber (Philadelphia: Temple University Press, 1981), pp. 342-56, for a variety of case examples.

26 For a further discussion of how this might be done, see Weissman "Accreditation, Credentialing, and Accountability," pp. 50-51.

27 For a discussion of the difficulties of implementing feedback systems see Harold H. Weissman, "Clients, Staff, and Researchers: Their Role in Management Information Systems," *Administration in Social Work* 1 (Spring 1977): 43-52.

28 Aaron Wildavsky, "The Self-evaluating Organization," *Public Administration Review* 32 (September-October 1972): 509-20.

29 Rosenbloom, p. 109.

30 Greer, p. 57.

Debate with Authors

Comments on "Scientific Imperatives in Social Work Research and Practice"

Thomas P. Holland

Case Western Reserve University

In the June 1982 issue of *Social Service Review* ("Scientific Imperatives in Social Work Research and Practice," *Social Service Review* 56 [June 1982]: 246--58), Walter Hudson made some interesting comments regarding the nature and basis of social work research. As a participant in the efforts to develop the knowledge base of our profession, I was intrigued by some of Hudson's statements and puzzled by others.

After asserting the distinctiveness of his own position from that of logical positivism, Hudson made some assertions that seem inexplicable without some reference to the latter philosophical perspective. For example, he maintains, "If you cannot measure a client's problem, it does not exist" (p. 252). Experience is our only source of knowledge, he points out. Then, with a summary dismissal of "mentalisms," he seems to constrain his meaning of experience to direct sensory observations. Apparently, Mr. Hudson's position is that anything that cannot be directly observed is meaningless or, at any rate, unreal. My discomfort is prompted by what seems to be a severely prescriptive exclusion of vast domains of human experience.

His position must have surprised many *SSR* readers inasmuch as it would appear to rule out most of what human beings consider important in life—love, courage, hope, faith, commitment, and so forth. I hope that my concerns arise from misunderstanding Hudson's remarks, clouded as they were with ambiguities, oversimplifications, and gratuitous sarcasm toward Martha Heineman Pieper. But, on the off chance that he indeed meant what he seemed to be saying, let us examine the position for a moment. Should our concerns be unwarranted or based upon misunderstanding, perhaps Hudson will resolve our apprehensions by further clarification.

Social Service Review (June 1983).

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At first glance, it would appear that Hudson has set up a principle criterion for knowledge that his own position cannot meet. If it is true that knowledge is obtained only via sense perceptions, then by means of what sense perceptions did Hudson gain this very conclusion? When, where, and how does anyone encounter the observations that provide the basis for concluding that any other dimensions of knowledge are mere illusions?

The principle Hudson seems to be invoking is really an *a priori* assumption, a rule set forth prior to any specific sensations, not a conclusion from the data at all. As such, it would fall within his category of mere "mentalisms," which he so disdainfully casts aside as useless.

A profession so soundly criticized for allowing its status desires to lure into an affair with psychoanalytic theory should beware of the rewards apparently offered now in the name of science, if only we give up some minor illusions about our incidental mental experiences of dread, courage, fear, hope, guilt, love, and so on. By insisting that any experiences that cannot be operationalized, observed, and measured are meaningless, Hudson's extreme position would seem to tell the casual observer to eviscerate not only most of what the profession of social work deals with, but also much of what humanity has deemed most important. Can we really accept such a direction?

The development of knowledge about our social world does proceed through processes of controlled inference and must be formulated in propositions that may be assessed by anyone who cares to take the trouble to do so. However, the processes of assessment need not rely exclusively on sense perceptions. Hudson appears to be trapped in his own form of positivism, perhaps assuming that the only alternative to such an extreme position is subjective, uncontrollable, unverifiable introspection. However, our knowledge of social reality is a complex pattern of shared meanings, communicated by language and transmitted through socialization. Taking cognizance of the meanings, goals, purposes, and values that people attach to their actions is essential to developing an adequate understanding of social reality, including that of a scientist. This does not mean that we are limited to subjective introspection, uncontrolled by the experience of others. Rather, our efforts to understand meanings are controllable at least to the same extent as the individual sensory perceptions of one observer can be checked by another.

Empiricism or positivism takes for granted our intersubjective, shared reality. They assume a solution to the problem of social research before the inquiry even begins. Rather than taking such a leap and denying that he is doing so, the social scientist should begin with careful attention to the variety of human experience and the meanings, values, and patterns people attach to the world. Theories that relate these components can be evaluated on the basis of their logical consistency and their explanatory adequacy. Aspects of the theory may then be experimentally varied and predicted changes assessed for their accuracy. All such steps rely on experience, provided we do not unnecessarily constrain ourselves exclusively to sensory perceptions of external events or objects but include an understanding of human actions in terms of their underlying motives, goals, and meanings.

Actually, "it matters little whether [Hudson] as an individual is correct or not. What does matter is that [he] may well have misled some readers into believing a set of unfounded conclusions in support of which [he] provides not one shred of evidence" (p. 255). Worse yet, the form and structure of many of his arguments suggest that social workers discard their own experience for a viewpoint that would not only undermine research but eviscerate practice.

But perhaps my mentalisms about Hudson's intentions are based on mistaken perceptions. In lieu of direct observation of his behavior, perhaps he can

communicate to us a valid mental understanding of his intended meanings. My hope for that is what motivated the behavior of preparing these comments.

Author's Reply

Walter H. Hudson
Florida State University

Professor Thomas P. Holland tells us that he is puzzled by some of the statements in my article ("Scientific Imperatives in Social Work Research and Practice," *Social Service Review* 56 [June 1982]: 246-58). I am puzzled by some of the statements in his letter. For example, Holland implies that I argue for exclusive use of direct observation. Nowhere in my article did I assert or imply such a thing. Holland seems to have read something that was not even there. Indeed, I did not, do not, and will not advocate such an absurd position.

The greatest puzzlement for me arises from Holland's implicit rejection of the thesis that "knowledge is obtained *only* via sense perception." I should like Holland to explain to us by what mechanisms of "non-sense" perception he and others produce new knowledge? Surely he is not urging the use of "extra"-sensory perceptions as a basis for developing and validating the knowledge base of our profession.

Holland says that my position (of using experience and asking for empirical evidence to support our claims) "would appear to rule out . . . love, courage, hope, faith, commitment, and so forth." How he could arrive at such a conclusion is beyond me. Surely Holland knows that people regularly experience love, courage, hope, and so forth. He surely must know also that scientists can directly observe behaviors that seem to reflect such experiences, but they cannot directly observe those experiences in others. What they can directly observe in others is the acts of reporting that those experiences occur (a form of indirect observation).

Holland seems distressed over my "summary dismissal of mentalisms." I would hope that he is not advocating retention and use of mentalisms of the sort described and illustrated in my article.

Holland says, "The development of knowledge about our social world does proceed through processes of controlled inference and must be formulated in propositions that may be assessed by anyone who cares to take the trouble to do so." Granted, but I suggest we pay little heed to those who mindlessly trouble themselves in their assessments (like those who merely read tea leaves) and attend more to the findings and methods of those who trouble themselves greatly by conducting controlled, replicable assessments through empirical testing.

Professor Holland suggests that his "mentalisms" about my article arise from his own mistaken perceptions. He is, of course, correct in that, but his misconstructions about my article are not the heart of the matter. The heart of the matter is that the article by Martha Heineman Pieper ("The Obsolete Scientific Imperative in Social Work Research," *Social Service Review* 55 [Sep-

tember 1981] 371-97) was not a construction but a destruction. It was an attack on logical empiricism but on empiricism. Her article and one by Roy A. Ruckdeschel and Buford E. Farris ("Assessing Practice: A Critical Look at the Single Case Approach," *Social Casework* 62 [September 1981] 413-19) are examples of a body of thought that seeks permissive freedom, render uncontrolled and even unverifiable assertions about social reality in general, and in social work practice specifically. Such authors seek to establish a basis for that permissive freedom by first attacking, and they hope render inoperable, the devices that we use to test, validate, or invalidate propositions about social reality and social work practice.

In the early 1970s our profession was severely embarrassed because we had to report that precious little evidence was available to support our claim of practice effectiveness. To our credit, we sought remedy by adopting new methods of assessment, and an increasing number of schools of social work are now routinely providing a type of training that enables practitioners regularly validate the effectiveness of our interventions and to modify constructively those found wanting. In the space of a single decade we have a rather large literature around an emerging practice modality that quite demonstrated high promise. It is the high promise of providing more effective service to our clients in virtually every arena of social work practice. It is the high promise of being able to demonstrate to ourselves and our constituents that we do know what we are talking about.

Of course, the final chapter is not in. It has only begun to be written. Unfortunately, in the midst of making rapid and large progress we find ourselves who speak against validating our practice effectiveness and argue against use of the very tools that seem to account for it. They speak against the use of controlled testing of propositions, reliable and valid information, and publication of research. They offer a set of unclear alternatives that are poorly articulated. They thereby fail to offer more effective or efficient means of developing or validating our knowledge base. By their constructions and constructions they move us backward in time when our principle modes of "knowing" consisted of authority, intuition, and insight. It is a plea to avoid accountability.

One of the fundamental targets of the detractors is the introduction of use of single-subject or time-series designs in social work practice. However, any advocacy for the use of that technology must avoid excesses of zeal, as the response by Ludwig I. Geismar and Katherine M. Wood ("Evaluating Practice: Science as Faith," *Social Casework* 63 [May 1982]: 266-75) provides a superb statement of perspective in that regard. On the other hand, idle poorly argued logicism does not provide a sound basis for abandoning use of rapidly emerging tools that seem to be bringing about rapid progress. Had Pieper or Ruckdeschel and Farris conducted carefully controlled studies to show, for example, that the use of $N = 1$ designs are not what they cracked up to be, that would be a solid contribution to which many would have attended constructively.

No, Professor Holland, we cannot and must not ignore the uncontroverted observations or theoretical assertions of our practitioners or our scholars. The theorist and empiricist desperately need each other. When the former goes to ascendancy, we create, in the extreme, forms of myth and magic that produce charlatans who rely on authority to retain their status. When the latter goes to ascendancy, we create, in the extreme, a group of inhuman mechanists who are equal charlatans by dint of their colossal simplifications. We need the theorist who creates or advocates new models of practice. We also need the empiricist who will test those models. Finally, we need a set of models that have been tested and that by virtue of having passed some rigorous tests of evidence

to provide some assurance that we in fact serve when we claim to do so. In past years, we had clear excesses of theorizing and clear deficits of empirical testing. Today we have a much improved balance between them. If we choose to retain and strengthen that balance, the prospects for our continued growth and development as a profession appear to be promising.

Erratum

In the article "Social Development and Mass Society: Iowa," by Stephen M. Wagner (*Social Service Review* 56 [September 1982]: 375-92), on page 385 change 251 to 25 in the first-row entry of the "Zero-Order Correlations" column in table 4.

Book Reviews

Rape and the Limits of Law Reform By Jeanne C. Marsh, Alison Geist, and Nathan Caplan. Boston: Auburn House Publishing Co., 1982. Pp. x+171. \$19.95

The law giveth, and the law taketh away. There is a reason why this book is titled *Rape and the "Limits" of Law Reform*. During the period from 1975 to 1981, the majority of state legislatures considered, and a significant minority (about twenty-five) passed, statutes that radically changed the laws governing rape, sodomy, incest, and the sexual abuse of children. States redefined the offense, repealed or modified the spousal exception, modified penalties, and introduced new rules prohibiting or restricting evidence concerning the prior sexual history of the rape victim. In 1975, the Michigan Criminal Sexual Conduct Statute was the first so-called rape reform statute, a statute that became a point of departure for those seeking to introduce comparable or analogous reforms in other states. This book is the most systematic and comprehensive study to date of the purpose and effect of that legislation. The authors attempted to measure the "success" of the Michigan rape reform statute in terms of its stated goals.

Measuring the effect of a highly specific piece of legislation sounds straightforward enough, especially when the reader sees that the University of Michigan Survey Research Center designed the research, until an attempt is made to define the goals of those lobbying for rape reform legislation. What groups can be said to articulate the "goals" of the legislation? Those who drafted the initial bill and lobbied the legislature over months and months of hearings? The legislative committee that considered the policy implications of the legislation (perhaps incompletely, with erroneous information) and voted it out of committee? The legislative bodies that passed the law? The governor who signed it? The special interest groups, such as rape crisis counselors, prosecutors, and police, at least some of whom supported bills similar to the Michigan statute? The groups who were responsible for implementing the new legislation, most importantly prosecutors, defense attorneys, and judges? The entire book could have been, and fortunately was not, devoted to the question of what the purpose of the statute is. Instead, the authors sensibly directed their research design to measuring the effect and specific impact of parts of the legislation, taking goals and policies both from written and documented statements of those involved in lobbying for the legislation. For example, it was given among all those lobbying for the reform bill that one goal was to increase



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the number of prosecutions and convictions in sex offense cases. The purpose was not necessarily to put offenders away for a longer period of time—in fact, the reform statutes typically reduced maximum penalties—but the purpose was to arrest and prosecute more offenders and put more offenders away for some period of time. Was this minimal, simple objective accomplished by the new law? The answer is not so clear, although this book tells us that respondents were of the opinion that the law increased convictions (pp. 43–45).

Another important feature of the Michigan statute, a feature which has also been adopted in many other states, is the introduction of tiered, or degree-structured, offenses. In other words, rape was replaced by three or four degrees of criminal sexual conduct. The purpose was to facilitate plea bargaining, the method of adjudication in the vast majority of cases in urban jurisdictions. The prosecution under the new law could charge first-degree criminal sexual conduct and then bargain down to second or third degree and still come away with a conviction. Was that purpose achieved by the new legislation? The answer that emerges here is the honest one: Yes, no, and we do not really know.

All of this only goes to show that it is useful to ask a question, but the answer may not be informative, or there may not be anyone who can answer the question. Take the plea bargaining example. A majority (59 percent) of the respondents in this study said that there had been no change in plea-bargaining practices due to the change in the law (p. 48). But the form of the question and the limited possibility of the answers themselves raise more questions. The question was, "Is the amount of plea bargaining that goes on now [after the passage of the reform legislation] more, the same, or less than before the new CSC (Criminal Sexual Conduct) law went into effect?" (prosecutor question 7a, reprinted at p. 130). The answer might simply have been an overwhelming yes, but the reason for the increase in plea bargaining might have been an increase in reported cases, a decrease in prosecutorial staff, a change in office policy concerning plea bargaining in sex offense cases, the degree structure of the new statute, or other reasons. Similarly, an answer of no might be based on similarly colinear factors. What if a prosecutor had been asked, "Do you now refuse to plead any cases you would have agreed to plead under the prior law?" Nor is this comment intended to suggest that the authors did not properly structure their research design. On the contrary, it is the careful methodology that is the major contribution here. This study is the best example of survey research in this area. My comment simply expresses the opinion that perhaps survey research cannot even tell us what we want to know in this area because the opinions of the relevant observers cannot be contained in such questions. But at least this study asked, and at least this book pulls together the available data and adds a whole new wealth of relevant information on opinion. If this book cannot tell us everything we want to know, it tells us a great deal that is useful and helpful, and the information is presented carefully and clearly. The authors are also highly sensitive to this form of criticism; chapter subtitles are accurately captioned, "Perceptions of Changes in Reports, Arrests, and Convictions" (p. 42). And the authors scrutinize the data with an appropriately skeptical eye.

This book will remain for some time the best study of the impact of rape reform legislation in America in the 1970s. Legal reform in the area of rape was one of the most radical changes in state law to occur in the past twenty years. In 1950 or 1960 no one would have or could have predicted that rape would be redefined as sex-neutral sexual assault or criminal sexual conduct in almost half of the states by 1980, or that by that time almost every state would have enacted a statute limiting the admissibility of evidence concerning

the victim's prior sexual conduct. The wonder is both that such revolutionary statutes were passed, and that they seemed to have had so little practical effect. The contribution of this volume, and it is unique, is that it takes a hard, systematic look at what turns out to be an almost immeasurable practical effect.

Beyond this study, what remains to be emphasized is the extent of the impact of the rape reform movement outside the formal criminal justice system. The women who lobbied throughout this legislation in Michigan and elsewhere formed political alliances and remained an active force on a range of issues from abortion through foster care to tax. Those who founded and staffed the first rape crisis centers became a core group of national feminist leaders. Public discussion of the legal issues surrounding rape and sexual assault changed popular awareness to an extent that many would not have believed possible. How do we measure the success of a reform statute? Not simply by the goals, however laudatory, as articulated by those lobbying for the reform. Statutory reform can only accomplish a tiny fraction of what is hoped for at the outset, but often the immediate, measurable effect, such as that documented in this study, is itself just a small fraction of a large, more amorphous overall impact that can generally be attributed to the passage of legislation. One important and rarely articulated lesson should have been learned from the passage of rape reform legislation first in Michigan and then in the majority of states. The state legislatures, for all of their vaunted conservatism, were extraordinarily responsive to political pressure on this issue, and to political pressure from an alliance of groups not usually seen in the legislative corridors of state capitols. Reading this book will make readers more sensitive to the fact that laws cannot change institutions and attitudes overnight, but changing the law, or working for change, may have far wider implications than were imagined at the outset, when reformers entered the political doorway with a straightforward and limited reform objective. The success of rape reform in terms of specific objectives may have been less than was hoped, but surely in a larger context the influence of the Michigan Criminal Sexual Conduct Statute was far broader than could have been expected. For anyone concerned with rape or legal reform generally, this book is highly recommended.

Leigh Bienen
Princeton, New Jersey

Clinical Social Work. By Helen Northen. New York. Columbia University Press, 1982. Pp. xii+369. \$17.50.

In a paper delivered to the National Conference on Charities and Correction in 1857, Mary Richmond argued the case for a new training school in applied philanthropy that, among many other blessings, would "spare those new charity workers who come after us the groping and blundering by which we have acquired our own stock of experience" (in *The Long View* [New York: Irvington Publishers, 1977], p. 99). Helen Northen has not given us a full-blown theory of clinical social work practice, but she has certainly spared us much groping and blundering. This volume follows in a tradition of books by master teachers, among whom Helen Perlman continues to stand first, that convey both a sense of context and a body of content. The context here is clearly and plainly social work practice broadly conceived. If nothing else, we can thank Helen Northen for saving that recent and much misused label, "clinical social work," from a

mistakenly concrete identification with psychotherapy. Northen's purpose in writing the book is as follows ". . . to develop an integrated theoretical approach to practice for one important part of the profession—direct services to individuals, families, and other small groups toward the general purpose of enhanced psychosocial functioning" (p. 1).

In so defining the parameters of her inquiry, Northen appears to be in agreement with Gilbert and Specht, whom she quotes to the effect that all encompassing conceptions of practice (micro and macro) "aim toward professional unity at the cost of functional relevance" (p. 11). The ten chapters flow logically from a general perspective on social work practice, through values and knowledge, assessment and individualized planning, initial helping, the core phases of helping, and termination and transition. The text is attractively typeset and organized with end notes, an excellent bibliography, and index. Throughout, Northen's many years of practice teaching are amply evidenced in the ease with which she handles her material and the wealth of practice examples she provides. Particularly, in its early chapters, this book will be useful to beginning students in deepening their understanding of the landscape, values, and tradition from which present conceptions of social treatment have emerged. Throughout, the author resists the temptation to equate social work practice with any particular technology of helping and stresses the importance of relationship as a cornerstone of effective helping. If the book can be faulted, it is a fault shared by many of this particular genre of practice text, namely, that it is long on perspective and short on practice technology. I suspect the author's response to such criticism is that in professional education, the latter should not precede nor substitute for the former—a sentiment with which I heartily agree. Northen is not disinterested in the specifics of practice in a given situation, but her primary aim is to provide us with an overview of the sweep of practice with individuals, families, and groups as it has developed in a social work context—what, in an earlier effort, Perlman called the "common elements and operations" of practice (*Social Casework: A Problem-solving Process* [Chicago: University of Chicago Press, 1957]). In providing such a perspective and overview, the author, in my view, succeeds handsomely.

Inevitably, there are lacunae and topics that might have been developed more fully. Despite her strong statement about the power of environmental helping, for example, Northen's view of the context for practice is, more often than not, confined to an office. One would have hoped for more examples where intervention took place in the client's natural life milieu. Similarly, there could well have been further explication of the multiple roles that social treatment encompasses, including education, advocacy, and consultation to informal helping networks. Treatment of such topics is often brief, as in the author's introduction of the concept of "support system" (p. 260), with only a hint of the variety of ways a practitioner can work with informal support networks. The author does talk (p. 145) about "multiple modalities" and the flexible use of service units, and one wishes she had chosen to develop this concept more: What "packages" of service might make sense, say, for a delinquent adolescent? What complementarities/conflicts exist among various forms of helping, say, individual therapy and social support groups? In the area of knowledge foundations, Northen presents, uncritically I believe, psychoanalytic ego psychology as an important foundation for practice at the expense of other bodies of theory. For example, social learning theory is covered only slightly and then in a somewhat misleading way: "In all models of practice, except perhaps behavior modification and task centered practice, relationship is accorded great importance as a dynamic for growth and change" (p. 97).

If the uninitiated student were to conclude from that statement that behavior practice in social work eschews relationship as an important element in change process, he would be drawing an inaccurate conclusion about successful behavioral practice and overlooking some key behavioral research that much speaks to the importance of relationship and attempts to define specific and measurable ways.

None of these problems is reflected in the definition of clinical social embraced by the author: "the maintenance and enhancement of the psychosocial functioning of individuals, families and small groups by maximizing the availability of needed intrapersonal, interpersonal and societal resources" (p. 1). In short, Northen has given us a useful book from which to teach and which to learn. I think it particularly strong on the values common to practice and on the importance of eclecticism. Northen writes from the perspective of many years as a practitioner, teacher, and scholar. She has obviously thought long and hard on her subject. This present work will enrich practice literature for years to come.

James K. Whitt
University of Washington

School Social Work. By Betsy Ledbetter Hancock. Englewood Cliffs, Prentice-Hall, Inc., 1982. Pp. viii+262. \$19.95.

Amid the anxieties fostered by the economic climate of retrenchment cutbacks in financial support for vital social programming, we are witness to the continued demise of school social work services from Maine to Mississippi. Coupled with real concern for the devastating effect on children and families when needed services are not forthcoming is the concern with the long-term viability of school social work as a professional discipline. Hancock's *School Social Work* is timely in that it reaffirms and validates the *raison d'être* of school social work practice. By exploring the historical development of school social work within a social political economic context, the author demonstrates the fabric and contour of school social work has varied over the decades in response to societal conditions. A more cohesive and synthesized discussion of the literature in the initial chapter would have assisted the author in focus on the complexities inherent in defining the nature, boundaries, and function of school social work.

In the eighties, the previously perceived dichotomy of the traditional clinical model and the school change model appears to be on the wane. Guiding the reader, albeit somewhat hastily, through the social work literature of the nineteenth century to the present, Hancock concludes, "Research data from recent years indicate that there is a developing trend away from the case-by-individual child approach toward a broader, more comprehensive concept of services" (p. 19), yet her focus is primarily clinical.

Basically, the book is descriptive in approach, presenting a cursory overview of the scope and state of the field of school social work. What is lacking is a theoretical base for social work practice in schools. The scarcity of any comprehensive treatment of the theory and practice of school social work speaks to the complexity of this field of practice. The author impressively explores the social ills and problems, such as school phobia, teenage pregnancy, substance abuse, and imprisoned parents, that adversely affect a child's ability to function adequately in school. In review of legislation affecting the school, the author notes, "PL are initials that stand for Public Law" (p. 18). While some

resembling a first-grade primer, and thus embracing a simplistic approach, this is by no means a trivial chapter. Presented in a straightforward manner this information should prove to be useful to the practitioner who each day is faced with some aspect of governmental legislation. In this legalistic age attention to issues of due process is welcome. My primary criticism of this chapter and for the book in general is the lack of examples that could serve as a guide or source book to the tens of thousands of school social workers who are on the firing line. These are the social workers in our elementary and secondary schools who must undertake some kind of action, usually immediate, in a child's behalf. Hancock herself recognizes this by highlighting and linking the implications of the issues discussed—for example, the mobility of the American family—for the social worker practicing in the school. How a social worker can actually intervene in the school can be quite complex and requires specialized skills and know-how, and the process of so doing needs to be articulated.

Only minimal and superficial attention is given to the serious problem and manifestations of racism or racial prejudice, which remain rampant in our society and certainly in our schools. With the number of racial minorities or the increase (e.g., Hispanics, as noted by the author, and Asian-Americans not noted by the author), social workers must be at the helm of fostering the type of humanistic environments in schools to which the author alludes when discussing "alternative schools" (p. 25). The sections on Puerto Ricans, although informative, made me somewhat uncomfortable in that such descriptions tend to oversimplify a varied and complex people and culture and could lead to the kind of stereotyping that continues to occur in our society and thus in schools today.

Overall, the book puts the social work academician and the professional and student school social worker in touch with the complexities and issues vital to social work practice in schools. A bibliography compiling the references would be useful to this audience. Certainly this is a book that educators, principals, and other school administrators should read, in that it provides a different set of lenses for them to view their domain and at the time exposes them to what school social work is all about.

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Deinstitutionalizing Delinquent Youth By Michael Fabricant. Cambridge, Mass.: Schenkman Publishing Co., 1980. Pp. 222. \$15.50 (cloth), \$9.95 (paper).

Fabricant begins his book by describing the ideological and empirical foundations for deinstitutionalization as a strategy that dominated the imagination of social justice reformers in the child welfare, mental health, and juvenile justice arenas during the 1960s and 1970s. Fabricant has a simpler, saner ambition than trying to unravel the quagmire of argument, rebuttal, and counterrebuttal that constitutes the empirical base of the deinstitutionalization position. His goal is to describe the implementation problems at the local community level that occurred with the deinstitutionalization of the youth corrections system in the state of Massachusetts.

What makes this book unique and valuable is Fabricant's utilization of the interactionist method as the basis for analyzing this implementation process. This method facilitates a multidimensional analysis of inter- and intrainstitutional tensions that occur within bureaucratic systems undergoing change. It also

allows for a description of how these institutional changes affect the client and how the client adapts to them. This approach differs from traditional implementation studies, which tend to focus on power motivations of political and bureaucratic leadership as it seeks to accommodate, expedite, or impede public policy changes that affect them.

The juvenile justice system Fabricant describes contains the Department of Youth Services (DYS), police, juvenile court, probation staff, and group home. Taken as a whole, his description and analysis of these institutions as they react to change is quite good. The reader comes away with an understanding of how a shift in philosophy in one segment of the system (DYS) causes realignments among all others.

For example, as DYS implemented its new philosophy, it exerted its power to determine which youth would be admitted to its facilities. This diluted the court's power to commit delinquents to specific DYS institutions. The court was reduced to committing a delinquent to the DYS and then sitting back and watching as DYS exercised its discretion to place the youth in a community or an institutional setting. This realignment in dispositional power reverberated throughout the juvenile justice system. The heretofore amicable relationship between police and court began to show signs of strain. The police interpreted the court's loss of control over delinquents as an attack on their own credibility. Fabricant argues that the police reacted to this perception by bringing to court only the most serious offenders and trying to buttress those cases with the strongest possible evidence. He contends that the net result of the police attempt to establish stronger cases was an increase in the number of youth who had their civil rights violated and a consequent increase in tension between police and youth.

The rest of Fabricant's book follows in the same vein, documenting in successive chapters that deinstitutionalization changed the pattern of relations and increased tensions among the DYS, probation staff, group home, and youth.

The weakness in this book lies not in the framework for analysis but in an apparent partiality shown in two chapters. Fabricant's interpretation of the police reaction to deinstitutionalization (an increase in the violation of civil rights of youth) strikes me as being inadequately supported by the evidence. The documentation could also be read as self-serving statements by police about their prior behavior. His chapter on the court's probation staff appears to me to be romantic. Probation officers are not uniformly good guys working long and hard to win the confidence of their charges. They are, like most public servants, a mixed bag of good, bad, and indifferent employees.

Fabricant's policy recommendation for increased communication and coordination among the institutional players is of course laudable. But I take exception to his recommendation for an external advocacy mechanism to protect the "rights" of youth. Given Fabricant's complex description of the juvenile justice system, coordination with one more player, and really an extra player at that, is not necessary.

Besides the danger of increased fragmentation, external advocacy systems pose a more insidious problem. Many social service personnel who toil in public bureaucracies feel overworked and unsupported. In fact, many perceive themselves to be prime victims of the system. To create a system that focuses additional criticism on them will only exacerbate this problem. I am of the opinion that public money would be better spent in learning how to transform human service bureaucrats into advocates. The place for client accountability and advocacy is inside public bureaucracies, not outside them.

My criticism of this book should not detract the reader from its merits. For the person interested in understanding the complexity of public policy implementation, Fabricant's utilization of an interactionist perspective to explain both the inter- and intransubstantial tensions created by implementing public policy is a welcome addition to the literature. It helps one to understand the underlying pressures that lead to the bureaucratic game playing that so often confounds the implementation process.

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Social Work Research and Evaluation. Edited by Richard M. Grinnell, Jr. Itasca, Ill. F. E. Peacock Publishers, 1981. Pp. xii+773. \$19.50.

Transforming social work students who are skeptical of the value of research into skilled practitioner/researchers has emerged as an important goal in social work education. Calls for the integration of practice and research skills, while not new, are resulting in fresh and creative efforts to relate these areas to curriculum design and course structure. Faculty who have attempted to help students examine practice issues from the perspectives of research findings and methods have been painfully aware of the paucity of resource materials upon which to draw in support of their efforts. It is to this need that the present volume is directed.

Designed as a comprehensive introduction to research for the beginning social work student, the book "endeavors to bridge the gap between social work practice and research by providing a basic set of principles and concepts from which can be developed a foundation of general social work research knowledge" (p. xi). The thirty-one chapters of the volume address the areas of formulating and measuring research problems; research methods, data analyses; and evaluation, dissemination, and distribution of research knowledge. As stressed in the preface, this book is written by social workers for social workers, with an emphasis on readability and usefulness in actual practice and research situations.

The major strengths of the book appear to me to lie in its simple, straightforward presentation of issues and its consistent efforts to relate each research topic to the field of social work. The editor wisely assumes an ecumenical stance, avoiding unnecessary diversions into the nomothetic-ideographic controversy and considering a wide variety of quantitative and qualitative approaches to studying practice issues in social work. All material is presented in clear, jargon-free vocabulary, with frequent and extensive case samples. To whatever extent technical detail or statistical complexity has contributed to social workers' anxiety about research, this volume should be viewed as reassuring and non-threatening.

Achievement of such objectives, however, appears to have come at the price of extreme wordiness, repetitiveness, and unevenness in coverage. Several chapters (such as chap. 27) appear only to summarize, review, or describe material covered in other chapters. The same concept may be addressed by several writers at varying levels of depth or breadth. Such unevenness is apparent when, for example, the computation of one statistical procedure (confidence interval) is presented by two different writers, while another chapter merely notes in passing a major reliability indicator (alpha) and gives no clue to its calculation.

Instructors will find the chapters on "Single Subject Designs" and "Development of Personal Intervention Models" to be quite useful in linking research principles to direct situations. If we are to develop this new hybrid of practitioner/researcher, the material discussed in these chapters warrants our careful attention. However, for teachers of policy and administration who may also hope to produce program planning and management practitioner/researchers, the chapter on program evaluation will be a quick disappointment, despite the emphasis promised in the title of the volume. Likewise, that the chapter on policy analysis should contain no reference to cost-benefit analysis, surely a major tool of that field, was as surprising as it was disillusioning.

Occasionally, the writers' concern for simplicity results in misleading statements, such as Hudson's unqualified assertion that "if you cannot measure a client's problem, it does not exist" (p 132). One can only hope that the reader of such naive positivism will pause to wonder how seriously that writer has faced the complexities of practice or, at another level, has pondered the profound differences between what is and what ought to be, or other such problems of ethics. Efforts to bridge the gaps between practitioners and researchers are unnecessarily damaged by such superficial material, though the teacher using this text may find passages at least useful in providing stimuli for more thoughtful considerations of the issues.

For a well-integrated, thorough, yet nonquantitative introduction to social research methods, I am still inclined to prefer K. D. Bailey, *Methods of Social Research* (New York: Free Press, 1982). However, if one simply cannot teach without textbook examples drawn specifically from social work, then consideration should be given to Atherton and Klemmack, *Research Methods in Social Work: An Introduction* (Lexington, Mass.: D. C. Heath & Co., 1982). The latter volume provides a limited number of social work examples, covers a similar range of topics as does Grinnell, is much better integrated and less repetitive, and manages to accomplish this in 400 fewer pages.

Yet, Grinnell is to be applauded for his efforts to develop and extensively illustrate the linkages between research and social work practice. Measured against that goal, his volume emerges as a significant accomplishment, despite its other limitations. With some further editing to eliminate needless repetitions, fill in gaps, and smooth out the uneven places, the second edition of this work should be a major contribution to the development of the coming generation of effective social work practitioner/researchers.

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Brief Notices

A Family Budget Standard—Components of a Moderate Level of Living in New York City. Prepared by the Budget Standard Service, Anne Prezeszty, Chief. New York: Community Council of Greater New York, 1982. Pp. vii + 64. \$6.00.

A report on how much self-supporting families need to live at a moderate level in New York City. This publication represents the consensus of experts in the fields of home economy, nutrition, education, and consumer research. Although the four-person family remains central in the development of such a standard, this report provides budget-cost data for single parents, young singles, elderly singles, and retired couples.

Welfare Law and Order: A Critical Introduction to Law for Social Workers. By Pete Alcock and Phil Harris. Critical Texts in Social Work and the Welfare State, general editor, Peter Leonard. Atlantic Highlands, N.J.: Humanities Press, 1982. Pp. xvi + 219. \$27.25.

This text is written to help social workers understand the basic legislation that affects themselves and their clients. It provides the historical background and practical context of welfare law as well as suggesting the potentials and limits of law in a modern capitalistic society.

The Year Book of Social Policy in Britain 1980–1981. Edited by Catherine Jones and June Stevenson. Boston: Routledge & Kegan Paul, 1982. Pp. xvii + 239. \$35.00.

The tenth edition of an annual publication now under a new editorship. This volume focuses on the current reexamination of the philosophy and institutions of the welfare state. The contributors challenge certain topics in social policy that have been considered inviolable.

Social Work in Hospitals. By Bascom W. Rathff, Elizabeth M. Timberlake, and David P. Jentsch. Springfield, Ill.: Charles C. Thomas, 1982. Pp. vii + 119. \$14.75.

A helpful guide for the student and the beginning hospital social worker. It discusses the hospital as an institution and the various roles expected of social workers.

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Skills of Supervision and Staff Management. By Lawrence Shulman. Itasca, Ill.: F. F. Peacock Publishers, 1982. Pp. vi+366. \$16.95

It is often assumed that professionals with direct practice experience should be able to make the transition to supervisory positions with relative ease. The purpose of this work, however, is to show that although there is some truth to this assumption, clear, simple models of supervision practice are needed to facilitate interactional skills.

How Much Is Enough? Issues in Measuring the Adequacy of Family Income. Proceedings of a Conference, March 11, 1982. Edited by Mignon Sauber and Anne Perzeszty. New York: Community Council of Greater New York, 1982. Pp. v+36. \$3.00

With recent cutbacks in publicly funded social programs, it has become increasingly important to examine the criteria that are used to determine who will benefit from such programs. This publication is a report on a conference held to discuss just this issue. The participants discovered that in order to answer any questions on this subject, they needed to consider values along with data, procedures, and methods.

Milestone in Education for Social Work: The Carnegie Experiment 1954-1958. By Alma F. Hartshorn. London: Aardvark Books, 1982. Pp. xviii+145. £5.95

A study of the establishment in 1954 of the earliest course in applied social studies for social work students in Britain, "The Carnegie Course."

The Social Dimensions of Development: Social Policy and Planning in the Third World. By Margaret Hardman and James Midgley. Social Development in the Third World. Series Editor, James Midgley. New York: John Wiley & Sons, 1982. Pp. vii+317. \$41.95

A comprehensive textbook on issues of social policy in developing countries. It is designed to be used in sociology, social administration, and social work courses on the Third World.

Practical Politics: Social Work and Political Responsibility. Edited by Maryann Mahaffey and John W. Hanks. New York: National Association of Social Workers, 1982. Pp. vii+260. \$17.95 (cloth); \$14.95 (paper)

This book emphasizes that social workers offer a unique contribution to the realm of politics. It attempts to show how their knowledge, experience, and skills apply to the political process and how political participation can enhance their effectiveness.

A Challenge to Social Security: The Changing Roles of Women and Men in American Society. Edited by Richard V. Burkhauser and Karen C. Holden. New York: Academic Press, 1982. Pp. xxii+272. \$27.50

Its alleged bias against men and women in nontraditional roles has provoked considerable debate on the social security system. This volume addresses the

various reforms proposed and suggests underlying assumptions about family and work behavior.

The Rank and File Movement in Social Work. By Rick Spano. Washington, D.C.: University Press of America, 1982. Pp. 281. \$21.00 (cloth), \$11.00 (paper).

A study of the contributions of the Rank and File Movement to the profession of social work.

The Father Figure. By Lotna McKee and Margaret O'Brien. New York: Tavistock Publications, in association with Methuen, Inc., 1982. Pp. xii + 239. \$25.00 (cloth), \$10.95 (paper).

A book that challenges common cultural stereotypes about men. It is a collection of empirical studies conducted in Britain arguing that the nurturing aspect of men has been neglected by historians and social analysts.

The Structure of Freudian Thought: The Problem of Immutability and Discontinuity in Developmental Theory. By Melvin Feller. New York: International Universities Press, 1982. Pp. ix + 298. \$17.50.

The author looks at Freud's theory of personality development with respect to the problems of immutability and discontinuity. He claims that these are not unique to Freudian thought but are characteristic of any theory of development that maintains a Cartesian world view.

Informal Institutions: Alternative Networks in the Corporate State. Edited by Stuart Henry. New York: St. Martin's Press, 1982. Pp. xii + 224. \$22.50.

An acknowledgment of the effect of informal institutions on our daily lives. This book discusses the dependency of formal institutions on informal ones and argues that the latter are becoming increasingly popular as disillusionment with centralized bureaucracy deepens.

Day Care and the Working Poor: The Struggle for Self-Sufficiency. By Georgia L. McMurray and Dolores P. Kazankian. New York: Community Service Society of New York, 1982. Pp. vii + 140. \$7.50.

A report of a four-year study based on interviews with 200 poor families, primarily headed by women, who have had some involvement with the public day care program of New York City. The study found that rather than not working at all and relying on welfare, women would leave their children unattended in order to preserve their self-sufficiency.

Emergency Room Study of Sedative-Hypnotic Overdosage: A Study of the Issues. By Richard I. Shader, Carol L. Anglin, David Greenblatt, Jerold S. Harmatz, and Yoav Santo. Rockville, Md.: National Institute on Drug Abuse, 1982. Pp. v + 49. \$3.25.

A study providing comprehensive information on sedative-hypnotic overdosage. It looks at the particular drugs used, the reasons why they are used, their

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sources, the context of the overdosage, and the role of treatment programs for overdose patients. The result is a more precise picture of this population of drug users.

Interviewing in Social Work Practice: An Introduction. By Margaret Schubert. New York: Council on Social Work Education, 1982. Pp. xiv + 118. \$6.95.

Interviewing is a significant tool in the profession of social work. This book is a revision of an earlier volume, but its purpose remains the same: to help beginning interviewers acquire competence in working with individuals and families.

Services to Teen Mothers in New York City: Needs, Resources, Issues, and Trends. Prepared by Diana Tandler, Research Consultant. New York: Community Council of Greater New York, 1982. Pp. 16. \$3.50.

Teenage parents have a variety of needs and are costly to serve. This report examines the resources available, discusses the issues surrounding teenage parents, and suggests future trends in providing services for them.

Adolescent Parents: Implications of Two Studies on Teenage Parenthood. Proceedings of a Research Utilization Workshop. Edited by Roy L. Leavitt. New York: Community Council of Greater New York, 1982. Pp. 32. \$4.00.

The proceedings of a workshop addressing the major concerns of policymakers, planners, and providers regarding adolescent pregnancy and childbearing.

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The Flexner Myth and the History of Social Work

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Abraham Flexner's pronouncement in 1915 that social work was not a full profession came at a critical point in the intellectual development of social work and social work education. It led to strenuous efforts by organized social work to fulfill the criteria of a profession set forth by Flexner. The author suggests that these criteria should be put aside and attention directed toward developmental requirements that reflect the distinctive characteristics of social work as a major profession.

Whether one believes that historical events are largely accidental, fortuitous, existential occurrences to which meaning is attributed retrospectively, or that history can be understood as an interrelated set of causal forces, there are certain dramatic moments that have unusual consequences for the pattern of human events far into the future. In part this is the result of the specific nature of the event, in part it is a consequence of the meanings that are retrospectively attributed to that event.

The Abraham Flexner speech at the National Conference of Charities and Correction in Baltimore in 1915 was such an event. It has probably been the most significant event in the development of the intellectual rationalization for social work as an organized profession. The Flexner myth is also a prime example of the extent to which untested social science pronouncements can become endowed with the weight and authority of scientific truth.

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The Background of the Speech

The 1915 conference was a crossroads that brought together a rapidly growing interest in social work as a career and in training for social work. Social work had had a spectacular period of development over the preceding twenty-five years. The 1890s had brought many changes, particularly after the severe depression beginning in 1893. The friendly visitor volunteers (primarily women) in city charity agencies began to be replaced by employed case workers (also primarily women). Child welfare agencies were beginning to hire foster-home investigators, and settlement houses had full-time volunteers and some paid staff. New organizations were continually being established in cities, some around specialized problems and some based on a geographic service area.¹

Many of the initiatives that led to the establishment of the new social welfare organizations came from a very select group of women. Many were members of the first generation of graduates from the new women's colleges in New England and the Middle Atlantic states. They came from middle-class and upper-middle-class backgrounds and were seeking a personal career rather than following the traditional path to marriage, family, and homemaking.² There was almost no opportunity for them to enter the established professions—law, medicine, the clergy, or business management. Social welfare agencies provided an opportunity for the graduates of women's colleges to establish a career in a field in which many of the leaders were also women.

The beginnings of social work education.—Formal training for social workers also began in the 1890s and the first decade of the twentieth century.³ In 1897 at the national conference, Mary Richmond, then director of the Baltimore Charity Organization Society, presented a paper calling for an organized program of training for charity workers.⁴ In 1898 Edward Devine, executive director of the New York Charity Organization Society (COS), initiated a summer training program for social workers, with Richmond as one of the instructors.⁵ Shortly after the turn of the century the first full-time, year-long training programs began.

By 1912 the basic structure of social work education was established. Between the beginning of the one-year training program at the New York School of Philanthropy in 1904 and 1912, when the school added a second year to the program, an intense debate occurred between the proponents of two approaches to the social work curriculum.⁶ One approach called for an academic curriculum based on social theory with an analytic and reform orientation. This was the position taken by the first full-time director of the school, Samuel McCune Lindsay, a professor of economics on leave from Columbia University. This approach was also supported by Simon Patten, an economics professor

at the Wharton School, who was the intellectual mentor of Edward Devine and Lindsay.⁷ His interest in social welfare was reflected in the Kennedy lectures he presented at the New York School in 1905 in which he argued that social work should focus on fundamental social policy issues—wholesale social welfare—rather than on case by case assistance—retail social welfare.⁸ A similar position was advocated by Edith Abbott, who became a faculty member of the Chicago School of Civics and Philanthropy in 1908.⁹ In 1920 the Chicago School became the School of Social Service Administration. Abbott became Dean in 1924.

The second approach called for a social work education curriculum based on practice wisdom with the objective of preparing individuals to be “case-workers” first and “social investigators” second. This position also argued for a strong emphasis on field-work experience for students and a close working relationship with the existing social welfare agencies. This position was advocated by Mary Richmond, who had come to the New York COS in 1905 from her position as director of the Philadelphia COS to be on the editorial staff of *Charities and the Commons*, the first professional journal in social work.¹⁰ Using the journal as a platform, she argued for an emphasis on the practical preparation of social workers, using case records as teaching materials, thus drawing on the professional experience of senior social workers. She also argued against making the program an academic unit of Columbia University, a move which she felt would result in too much emphasis on a traditional academic curriculum. This initial resistance to the establishment of schools of social work under the control of a university was highlighted by the action of the Russell Sage Foundation in withdrawing a promised grant to the Chicago School as a result of Edith Abbott’s plan for the school to become a part of the University of Chicago.¹¹

In the end the point of view of Mary Richmond about curriculum won out. During the period that Lindsay was the director of the New York School of Philanthropy the social theory content of the curriculum was steadily enlarged, and by 1911–12 courses on direct-service practice methods were treated as electives.¹² However, in 1912 Lindsay returned to Columbia citing disagreements with the trustees of the school about affiliation with Columbia and “whether, by closer physical proximity to the charitable agencies of the City, the laboratory and clinical resources of the School should be emphasized.”¹³ Beginning in 1912, the school adopted a two-year curriculum emphasizing the training of practicing social workers taught by full-time salaried faculty members with social work experience.

Edward Devine’s speech on the curriculum of the professional school of social work at the 1915 national conference reflected the developments at the New York School.¹⁴ That speech, taken together with statements that followed by faculty members from schools of social work in Boston

and St. Louis, could readily serve as an outline for a school of social work accreditation review today. Social work education was for persons (primarily women) who were college graduates. It involved a combination of field work and academic classes. The program preferably would take two years, with the first year being general and the second year providing for specialization. Devine suggested that the first priority among curriculum subjects was "a course which deals with individuals and families and their complicated disabilities."¹⁵ He added, "of such a course directed field work in organized charity, probation, medical social service, etc., is an essential part." After the study of family rehabilitation, the next important element was "the history and nature of social movements."¹⁶ Specialized studies in such subjects as health and hygiene, social legislation, and penology might be included, as well as courses in social statistics and administrative problems. It was clearly evident in many of the presentations at the 1915 conference that the content of social work education had received major attention among the leadership in social welfare, and that the issue was closely tied to the question of recognition as a profession.

The concern for recognition as a profession — The foundation for an organized structure of social work practitioners had also been established. In 1911 a group of colleges for women in New England and the New York area established the Intercollegiate Bureau of Occupations in New York City to assist their graduates in finding jobs in social work. One department of this organization, begun in 1917, was the National Social Worker's Exchange, interested in professional preparation and standards. In turn, this led to the formation of the American Association of Social Workers in 1921.¹⁷ In 1915 Jane Addams was the first of the new generation of women social workers to be chosen as president of the national conference with responsibility for the 1916 conference. The 1916 conference also changed its name from the National Conference of Charities and Corrections to the National Conference of Social Work.

The issue that social workers should be recognized as professionals was becoming critical. Individual and family rehabilitation problems that social workers dealt with frequently involved collaboration with doctors and lawyers, who often viewed the social workers as at best well-intentioned volunteer amateurs. Their understanding of family and community dynamics was often ignored, both because they were usually women and because they were not viewed as professional equals.

As the new training programs for social workers, other than the New York School, were being established under the general auspices of colleges and universities, although in most instances the connection was relatively informal, the question of recognition within the academic community also became an issue. Most of the schools were established as a result of pressure from the local community and contributors to

the academic institutions, not at the initiative of the academic leadership. Professional schools associated with colleges and universities had previously been limited to law, medicine, and theology together with engineering in the new technical institutes. To have social work recognized as a legitimate professional degree program, and social work faculty as legitimate members of the academy, it was essential that the professional status of social work be asserted.

Many of the women in social work, as well as the men, were also depending now upon their salary as a social worker as their major source of personal income. Practical necessities and the desire to be a self-supporting, independent adult were making the issue of salary increasingly important. Many of the voluntary agency boards viewed the women social workers essentially as well-intentioned, committed volunteers who would soon get married. They might deserve a modest stipend for their services, but they were hardly "professional specialists." This was an attitude that individual social workers could hardly hope to change, but one that might be modified by acting together to gain recognition as professionals.

Abraham Flexner

When the program committee of the national conference invited Abraham Flexner to address the 1915 meeting on the topic "Is Social Work a Profession?" Flexner was the most influential individual in the United States in the area of professional education, in particular, medical education. He was assistant secretary of the General Education Board, established by John D. Rockefeller to guide his efforts in applying his millions to the improvement of education in the United States.¹⁸ The interests of the General Education Board included public education in the South, the support of efforts to assist a number of small private colleges in urban centers across the United States to become full-scale universities, and the improvement of medical education.¹⁹

Prior to his appointment as a member of the staff of the General Education Board, Flexner had carried out an extensive study of medical education in Europe, the United States, and Canada for the Carnegie Foundation for the Advancement of Teaching. His report and its recommendations, backed by multi-million-dollar contributions from Rockefeller, became the definitive design for medical education in the United States in the twentieth century.²⁰ The report confirmed and legitimized a series of changes that were beginning to take place in medical education, particularly at Johns Hopkins University. Flexner

had studied at Johns Hopkins as an undergraduate, fulfilling the requirements for a bachelor's degree in two years. This was at the time when the university was establishing the first program of research-based graduate studies in the United States, including the research-based doctor of philosophy, based on the model of German universities.²¹ This was followed by the establishment at Johns Hopkins of the first "modern" medical school.

The changes taking place in medical education constituted, in effect, a "paradigm shift."²² In the period following the Civil War, medical education had changed from a process of individual apprenticeship to a system based on codified practice wisdom organized in standard textbooks and taught didactically in the classroom. The credibility of the intellectual frame of reference for this form of medical education was being destroyed by such new developments as the microscope and the clinical thermometer, the germ theory of disease, and the development of vaccines and chemical medications.²³

Flexner, in *Medical Education in the United States and Canada*, set forth his view of the critical elements of the new medical education.²⁴ It began with a minimum of two years of preparatory education at the college level in biology, chemistry, and physics. The professional education of the doctor was to be based on the direct and continuous participation of the student in the laboratory; he was to be, from the beginning, a scientist as well as a practitioner, working from the base of the known but always probing into those areas of knowledge that are based on "probabilities, surmises, theories."²⁵ The first two years of medical education were to deal with laboratory work in anatomy, physiology, pharmacology, and pathology; the last two to cover clinical work in medicine, surgery, and obstetrics. Both the laboratories and the settings for clinical learning were to be under the control of the medical school; thus, the teaching hospital became an essential element. Moreover, the physicians responsible for clinical teaching were to be full-time salaried teachers rather than practitioners teaching part-time.

The medical school at Johns Hopkins was the first school in the United States and Canada to implement this plan. It was the Johns Hopkins model that Flexner used to revolutionize the existing structure of medical education, assisted by the Rockefeller millions used strategically to promote contributions from other wealthy men in local communities to create university-affiliated modern medical schools.²⁶ While the fundamental motivation in Flexner's proposals was the improvement of the quality of medical care in the United States, they also reflected Flexner's concept of the requirements for establishing medicine as a true profession, combining knowledge with clinical skill and with accountability for the quality of individual performance. It was in the early years of his work to implement this concept of medicine

and medical education that he was invited to speak to the national conference.

The Flexner Argument and Its Weaknesses

In his address to the national conference, Flexner set forth six key elements in his model of "professions."²⁷ "Professions involve essentially intellectual operations with large individual responsibility, derive their raw material from science and learning, this material they work up to a practical and definite end, possess an educationally communicable technique, tend to self-organization, and are becoming increasingly altruistic in motivation."²⁸

Flexner then presented his diagnosis. He began his address by questioning his "competency to undertake the discussion"²⁹ because of his limited acquaintance with social work literature and social workers. However, his judgment was very explicit. Social work was a useful social activity, particularly as it helped link individuals with problems to resources. It could be said to have some of the characteristics of a profession, but it did not fulfill all the criteria. Flexner argued that while social work was an intellectual activity, it was "of a mediating [rather] than an original agency."³⁰ Rather than being "limited and definite in scope, . . . the field of employment [in social work] is indeed so vast that delimitation is impossible."³¹ He added, "a certain superficiality of attainment, a certain lack of practical ability, necessarily characterize such breadth of endeavor."³² It also followed that "the occupations of social workers are so numerous and diverse that no compact, purposefully organized educational discipline is feasible."³³ Flexner also observed that while great credit might be given for the fact that the social worker's "satisfaction is largely through the satisfactions procured by his efforts for others, . . . well trained men and women cannot, as a rule, be attracted to a vocation that does not promise a living wage in return for competent service."³⁴ He summed up his judgment with the observation that "he is, as social worker, not so much an expert himself as the mediator whose concern is to summon the expert."³⁵

Flexner further suggested to his audience of social workers that they were being too pushy in asserting a claim to being a profession; "the social worker is at times perhaps somewhat too self-confident; social work has suffered to some extent from one of the vices associated with journalism, excessive facility in speech and in action."³⁶ And he adds

later, "Now when social work becomes thoroughly professional in character and scientific in method, it will be perceived that vigor is not synonymous with intelligence."¹⁷ Near the end of his speech Flexner also noted that to his knowledge social work had no professional journal "which shall describe in careful terms what work is in progress."¹⁸

There is no report of the immediate audience reaction to the Flexner speech. Flexner apparently passed from the scene as far as social work was concerned. His autobiography, *I Remember*, which deals largely with his work in medical education, makes no mention of the 1915 speech or any other connection with organized social work.¹⁹ At the conference his speech was followed by one by Felix Frankfurter on "Social Work and Professional Training" that did not reflect any doubts about the professional status of social work but argued, based on the history of law schools, that schools of social work should be affiliated with universities.¹⁰

Most of the leaders of social work, particularly those involved in social work education, accepted the Flexner diagnosis that social work was not an "established" profession, although Mary Richmond argued in a speech to the conference in 1917 that social work did indeed have "educationally communicable" skills and techniques of its own rather than being primarily a "mediating" agency.¹¹ Having accepted Flexner's authoritative diagnosis, they used his model as a prescription and set out to prove that social work could fulfill each of the Flexner criteria. The logic seemed simple and straightforward: (1) social work was not a profession; (2) to be a profession social work must demonstrate that it had all of the characteristics of an established profession as described by Flexner; and (3) at the time when social work has established all of the characteristics of an established profession there will be an immediate and universal acknowledgment by all elements of society of the status of social workers as professionals. There were obviously serious flaws in the organization of this argument.

Defects in the analysis of professions —Flexner's analysis of the characteristics of professions was presented with authority, as though based on a detailed comparative study of specific social institutions. However, his analysis had the same defects that other purported studies of professions have had since then. Flexner's analysis started with an arbitrary listing of "established professions," followed by an analysis of what the author viewed as their common characteristics. What is striking about this list, and similar lists set forth by other writers since, is that no two authors have come up with the same set of established, or recognized, professions. Flexner in his speech listed medicine, law, engineering, literature, painting, and music as "unmistakable professions."¹² At another point he included architecture and university teaching. Carr-Saunders, who has been described as the "first social scientist"¹³ to study professionalization, lists three established professions

(law, medicine, clergy) and five new professions.¹¹ An analysis by Goode in the 1960s lists nine recognized professions.¹² Between the Flexner and Goode lists, fourteen different "recognized" professions were identified. Moreover, no two scholars have come up with the same list of common characteristics of professions from their comparative analyses.¹³ Roth, in a 1974 article, lists seven different sets of criteria used by various authors, including Flexner, to define a profession, no two of which are identical.¹⁷

However, the criteria that are presented as derived from a comparative analysis of all professions are seldom applicable in fact to all of the "recognized" professions listed by a given author. In particular, law, the clergy, and university faculty, while recognized as professions from the earliest studies, fail to meet many of the criteria used by Flexner or by other scholars.¹⁴ Medicine and law are always included as recognized professions, and the criteria cited are always applicable to medicine. Indeed, in a 1973 article, "The Schools of the Minor Professions," Glazer argues that medicine is the only true profession and that all others are "minor professions."¹⁵ Glazer includes social work as one of the minor professions, and his argument in turn is used as a point of departure for a 1981 article by Martin Rein and Sheldon B. White on the relation of knowledge to practice skills in social work.¹⁶

Flexner avoided the issue of a detailed analysis of each of the "established" professions by simply saying, "Let the case of medicine suffice."¹¹ He then proceeded to validate his six criteria, essentially derived from his study of medical education, by demonstrating, in a classical example of circular logic, that they were characteristic of medicine. Indeed, Flexner slid quickly over his own proofs, dealing with the question of "a technique capable of communication through an orderly and highly specialized educational discipline," by asserting that medicine "lends itself admirably to an effective and orderly educational discipline."¹² He asserted that because the six criteria were characteristic of medicine, and by extension, of all established professions, they were appropriate criteria for assessing the professional status of social work. The prestige of Flexner, reinforced by the prestige of the General Education Board, the backing of Rockefeller, and the reputation of medicine as a profession, were sufficient to give his pronouncements the image of being fundamental principles of natural law despite their lack of empirical support.

Medical versus social work paradigms —Social work, like medicine, was in the midst of an intellectual paradigm shift, as described in Kuhn's *The Structure of Scientific Revolutions*,²¹ in the period before World War I. The change under way in social work, however, was from a theory of practice based on morality to one based on practice wisdom. The writings of Josephine Shaw Lowell, the leading intellectual spokesperson for the development of organized charity in the period before 1900,

were organized around a series of moral arguments. The key argument for systematic charity was the destructive immorality of "pauperism," a condition often argued as being created by the unsystematic provision of charitable assistance or poor relief.⁵⁴ But the validity of the moral approach to the problems of poverty had been undercut by studies such as Booth's on poverty in London that indicated that illness and accidents, and lack of employment, rather than lack of moral fiber, were the source of widespread poverty.⁵⁵ It was the application of practice wisdom rather than sweeping moral judgments that Mary Richmond advocated in her writings that were ultimately brought together in *Social Diagnosis*.⁵⁶

The development of schools of social work was based on a systematic extension of the in-service training programs that had been initiated in a number of charity agencies—training based on the practical experience of senior caseworkers. When the schools began to employ full-time faculty, they were, for the most part, experienced practitioners like Mary Richmond, who taught from their own experience. Flexner was immersed in a shift from practice wisdom to science. He disparaged practice wisdom because it had been substantially discredited in medical practice and because it did not have the characteristics of the systematic, theoretically coherent body of knowledge that he felt could be found in the scientific disciplines of physics, biology, and chemistry. Organized social work, however, at that moment was seeking to move forward by establishing the supremacy of organized practice wisdom as the intellectual base for professional practice in preference to the unsystematic application of individual moral judgments.

Who recognizes professions?—The Flexner argument also reflected the general point of view that there was indeed a definitive class of "established" professions, and that there were occupations that aspired to be recognized as professions but that did not have the requisite qualifications. Flexner's message was that it was the function of intellectual leaders, like himself, to sit in judgment on this issue. It was their responsibility to protect the status and power of established professions against the claims of "social climbers" and to determine when, if ever, a particular occupation had passed the test. This argument ignored the fact that there was no such definitive jury to determine the professional status of occupations except, in the broadest sense, public opinion. Moreover, it did not take into account the fact that unlike accreditation, legitimation of an occupation as a profession is not granted at a particular moment in time through a process of impartial review and judgment. A profession is deemed a profession when the public accepts the definition of specialized knowledge and competency advanced by a particular occupation, regardless of the internal characteristics of the occupation.⁵⁷ Indeed, it can be argued that the pseudoscientific analyses of professions, as presented by Flexner

and others, have always been part of the ongoing rivalry among organized occupations for status recognition, rather than being objective comparative studies of the actual characteristics of a range of occupations.

In spite of these defects in the Flexner argument, his model of an established profession became the most important organizing concept in the conceptual development of social work and, in particular, of social work education. The meanings that social workers read into the Flexner speech took on a mythlike character that reappeared at each crucial turning point in the development of the profession.

The Search for a Unified Profession

One of Flexner's key criteria was the existence of a "tendency to association" that has come to mean the existence of a single inclusive, highly organized professional association. The push to develop such a professional association in social work began about the time of the Flexner speech. The immediate result was the establishment of a series of social work associations in the early 1920s, including not only the American Association of Social Workers but also a series of organizations in psychiatric social work, medical social work, and school social work.⁵⁸ While these associations were originally inclusive of nearly everyone in social work positions, they each developed restrictive membership requirements over the years. This was an effort, in part, to establish a distinction between professional social workers and all others working in social welfare positions—a distinction that Flexner had suggested was essential for recognition as a profession.

In 1955, after thirty-five years, a unified professional association was founded, and the Flexner dictum was one of the critical forces for unification. In the first issue of *Social Work*, published immediately after the establishment of the National Association of Social Work, there was an explicit editorial comment about the potential relationship of the creation of a unified professional association to the effort to fulfill the Flexner criteria.⁵⁹

Ever since the formation of NASW, the struggle to maintain structural unity has been viewed by many leaders of the profession as the single most important issue faced by the organization. The defense of structural unity, in the face of functional diversity, has frequently been linked to a fear that such diversity could jeopardize the recognition of social work as a coherent profession, just as Flexner had asserted in 1915.

The Search for a Conceptual Framework and a Unique Method

Perhaps the greatest impact on the profession was made by Flexner's assertion that an established profession must have "a technique capable of communication through an orderly and highly specialized educational discipline" and his judgment that the activities of social work were "of a mediating rather than an original agency."⁶⁰ Moreover, he asserted that "the occupations of social work are so numerous and diverse that no compact, purposefully organized educational discipline is feasible."⁶¹ "The education is not technically professional so much as broadly cultural in a variety of realms of civic and social interest."⁶² From the time of the Porter Lee Committee report in 1915⁶³ and the Devine speech, social work has been intensely concerned with both the standardization of the social work curriculum and the identification of a distinctive social work technique or "method."

The development of a uniform structure for the accreditation of social work education programs was a constant concern of social work educators from the time of the formation of the American Association of Schools of Social Work in 1921. While social work educators were adopting formal accreditation standards in the 1930s,⁶⁴ such fields as city planning and public administration, which also had their beginnings at the turn of the century, have only addressed this issue seriously in the 1970s and 1980s. The continuing concern with refining the conceptual framework through the accreditation process is reflected in the recent Council on Social Work Education statement on curriculum policy.⁶⁵

The search for a unified theory of the profession continues to be pursued, yet always remains just beyond the reach of ordinary mortals. Flexner suggested that social work had developed in response to the failure of other professions to address the social dimension in professional practice. "Thus viewed, social work is, in part at least, not so much a separate profession, as an endeavor to supplement certain existing professions pending their completed development."⁶⁶ The search for a distinctive definition of method was reflected in the work of the Milford conferences that in 1929 produced an inclusive, "generic" definition of social case work that was not tied to particular practice settings.⁶⁷ In many ways this was a direct rejoinder to Flexner's assertion that social work was in fact only a part of other professions.⁶⁸

Much of the debate about cause and function during the 1920s apparently reflected the need to establish a unique professional technique, or function, for social work "which was educationally communicable" apart from the social movement commitments of individual

social workers.⁶⁹ Flexner had stated explicitly that such movement commitments were not a sufficient base for recognition as a profession. The emphasis on distinctive method also reinforced a focus on the casework counseling interview as the core professional technique in social work. This was a technique that could most readily be adapted to a private-practice model—a model that has been viewed by many practitioners as a close approximation to the medical model of professionalism that Flexner had in mind.

Bartlett's formulation of the distinctive elements of social work practice, it was asserted, constituted the description of a unique professional method.⁷⁰ It was developed explicitly to provide a single intellectual underpinning for the unified professional association. In the 1950s the social work academic community was also caught up in the effort to define one all-inclusive, "generic" theory of practice, not just across various areas of casework practice, but inclusive of group work, community organization, and social planning. Within the past five years, two special issues of *Social Work* have been devoted to defining a unified conceptual framework for social work practice, with each issue illustrating, in fact, the diversity of theoretical frameworks among social workers.⁷¹

The Search for a Scientific Theory

One of the critical elements in the development of the standard professional curriculum has been the need to demonstrate that there is a coherent "scientific" base to social work practice and, therefore, for the social work education curriculum. As Flexner had said, "the unmistakable professions derive their material directly from learning and science."⁷²

Social workers at the beginning of the century generally looked to such disciplines as sociology, psychology, economics, social economy, and political economy for organizing concepts. None of these disciplines, however, had a framework of cumulative theory that was directly applicable to casework practice with individuals. These disciplines were particularly irrelevant when applied to the irrational patterns of behavior confronted by social workers in psychiatric settings. The dynamic psychological theories of Freud, however, did fit both the institutional and the intellectual needs of social work. They were introduced to social workers through Freud's lectures at Clark University in 1912 and provided an integrated and coherent theoretical framework for understanding human development and human behavior.⁷³ His theories

could be taught systematically, and they could be applied to the individual behavior problems that many social workers dealt with. They were not testable, however, through the experimental methods of the physical and biological sciences.

The usefulness of Freudian theory for fulfilling one of the requirements of the Flexner myth is reflected in the rapid adoption of Freudian principles as a fundamental component in social work curricula. This took place in spite of the fact that no form of social work practice used the specific techniques of psychoanalytic treatment, and that only a very small proportion of social work practice in the field was, in any way, directly based on the systematic application of the developmental theories of Freud.⁷¹

The Search for a Scientific Base in Research

One of the most pervasive consequences of the Flexner myth has been its impact on the approach of social work to research, and ultimately on the nature of doctoral education in social work. While Freudian theory appeared to satisfy one element of the Flexner model, it did not deal directly with the model's strong emphasis on the importance of laboratory and experimental science. Flexner viewed the incorporation of research into the curriculum as both a way to expand the knowledge base and to train physicians to be both practitioners and investigators. The pragmatic results of applied research in medicine appeared to Flexner to be clear proof that research could result in substantially improved medical care. To live up to the Flexner expectations, therefore, social work had to incorporate a systematic approach to research. Such a development was also important for the reputation of social work in those universities where graduate students were being developed on the Johns Hopkins model.

However, the role of scientifically structured research in a practice wisdom profession is ambiguous. For example, in the practice of law, practice wisdom and precedent have much greater authority than science. From the beginning the role of research, or "social statistics," as Devine referred to it,⁷² in the social work curriculum has been unclear. In part it has been defined as preparation for understanding research. This assumes that the individual reports of piecemeal research appearing in the social science literature should be treated as sources of knowledge comparable to the systematized presentation of practice wisdom, an assumption that few, if any, teachers of practice methods would agree with. In part, the role of research has been viewed as the

teaching of descriptive methods that might be applicable to community surveys and other types of pragmatic information gathering. Another tradition that was central to the social work curriculum advocated by Edith Abbott was the use of research for social policy analysis.⁷⁶ But whatever the presumed objectives, the interesting element is that the teaching of the fundamentals of research in social work has been grounded in the assumptions of experimental clinical research design and methods of statistical analysis heavily drawn from psychology.

The tools of logical empiricism have the highest status in both the physical sciences and in medical research. However, the methods of logical empiricism have not been developed into a cumulative research program of systematic knowledge building for social work comparable to the role of clinical research in medicine.⁷⁷ Regardless of the lack of a direct connection to practice theory, the emphasis on logical empiricism and quantitative analytic methods in the social work curriculum has had other benefits. It has contributed to recognition of social work as a legitimate program of graduate studies within universities. Indeed, the current concern about the distinctions between the Ph.D. and the DSW, and the redesign of DSW programs as Ph.D. programs, attest to the power of the symbols associated with empirical research in general in establishing status within a university.⁷⁸

The tradition of teaching quantitative design and analysis at the master's degree level also resulted in the development of a cadre of faculty with specialized competence in research design who were essential for the later legitimation of doctoral programs. The existence of faculty with research competency has also made possible a respectable tradition of dissertation research in social work doctoral programs. Such research, however, is seldom part of a faculty-based, ongoing program of research development, funded as an integral part of the program of the school. Indeed, to a very substantial degree, it is the research studies of doctoral students rather than faculty research that is the major source of the practice-oriented research that does exist, with the exception of a few outstanding examples among senior faculty. The only other significant source is the research of junior faculty members that in many instances is probably the consequence of university requirements for tenure rather than being a reflection of the internal priorities in either social work or in schools of social work. The abatement over time of research requirements at the master's level, including the elimination of the research thesis, is a reflection of this lack of a clear functional relation between such requirements and the nature of professional practice.

It is in connection with doctoral programs that the real relevance of our current research activities for the development of the profession can be questioned. Without a cumulative body of research-based knowledge dealing with practice issues, the research component in doctoral education runs the risk of becoming another form of academic

exercise, although practiced with increasing sophistication. And until there is a coherent and cumulative body of practice-relevant knowledge that provides a context for ongoing research, the knowledge that is acquired through empirical investigation will remain window dressing for a profession that will continue to derive its practice principles almost entirely from codified practice wisdom. The role of research in strengthening practice procedures is, and will continue to be, an important issue in the development of the profession. However, it is not critical to the public recognition of social work as an established profession.

Other Versions of the Flexner Argument

The status of social work as a profession has continued to be debated throughout the decades since 1915. One of the significant events in that debate was the article by Ernest Greenwood, "Attributes of a Profession," in which he turned the tables by using the criteria of a true profession to argue that social work had fulfilled these criteria and had achieved the status of a fully accredited profession.⁷⁰ Using his own set of five criteria, his argument was intended to be a rejoinder to Flexner, and others, who disputed the status of social work. However, as persuasive as Greenwood's argument was that "social work is already a profession,"⁷⁰ and despite the fact that the proofs he cited were at least as relevant as those of Flexner, there was no indication that the level of anxiety among social workers about recognition as professionals was reduced, or that the attitude of anyone outside the profession was changed.

Moreover, Greenwood was followed a decade later by *The Semi-Professions and Their Organization*, edited by Amitai Etzioni.⁸¹ This book was a major extension of the use of sociological pseudoscience to defend the "established professions" against "aspiring professions." The semiprofessions, by Etzioni's definition, included not only social work, but nursing, library science, and elementary and secondary education. He introduced his own list of established professions and their distinctive criteria. The intellectual sources of those assertions were no better than the previous literature dealing with the sociology of professions.

Of more importance, however, is the underlying theme that pervades each of the chapters that deal with one of the "semiprofessions." The important discovery that Etzioni and the other contributors to the book stumbled upon, which Flexner had apparently overlooked in his

analysis, was that the semiprofessions are occupations in which women predominate.⁸² Thus, regardless of any efforts by social work to achieve the Flexner criteria, the effort, according to Etzioni et al., is doomed to failure because of the gender characteristics of social work's membership. It could be assumed from the Etzioni argument that changing the gender characteristics of social work would accomplish what all the other efforts at systematic professional development had, in his eyes, been unable to achieve.

The Flexner Myth and Social Work Today

As the Etzioni book clearly reveals, a pattern of deductive assumptions has developed around the analysis of professions—assumptions that have no systematic scientific or analytic base. These assumptions, however, continue to be used to defend the power position of “traditional” professions against the claims of newly emerging occupations. What is more striking is that the criteria cited are largely based on the professional structure of medical practice, with the primary intent of protecting the institutional status of medical practitioners against the claims of other occupational groups. This has important consequences for the relative status of professional specializations in the diagnostic process, in the process of prescription, and in the allocation of economic resources in health care. It has also contributed to skewing the development of social work toward a medical model of practice.

One of the important reasons why the Flexner myth has been so influential in the development of social work has been the unquestioning acceptance of its prescriptions by social workers. In many ways it has been a useful stimulus to the development of social work. The systematic attention to the institutional structure of the profession, the drive for recognition within universities, the continuing examination of the intellectual foundations of social work practice, and the effort to bridge the gap between research and practice have been important factors in the development of social work as a major profession.

But the myth has had detrimental consequences as well. These have included a frequently obsessive concern with intellectual unity and a preoccupation with defining a “unique” method. Perhaps the most important negative consequence has been a defensive and apologetic posture, reflecting constant concern with the question as to whether other groups in society recognize the professional status of social work. The security of acceptance as a profession always seems just out of reach, but possibly within our grasp, if only we could rationalize the

characteristics of the profession more persuasively in order to fit the Flexner formula.

It should be clear from the preceding analysis that the criteria for such acceptance do not take the form of an accreditation checklist, or a cutoff point on a rating scale. Indeed, it seems quite apparent that recognition as a profession is not granted by others, whoever those others might be, but is something that is established, bit by bit, by an occupational group through its own efforts. Indeed, the most important constituency for establishing public creditability as a profession may be practicing social workers. When, or if, social workers themselves believe that social work is an established profession, and act on that belief, other groups in society are likely to agree. Basically, an occupation is recognized as a profession when it asserts a right to be accorded such recognition by other professional groups and can make it hold. There are certain forms of argument and evidence that may assist in doing just that. But contrary to Flexner, no two professions have identical structural characteristics. The characteristics of one profession do not constitute an effective argument for establishing the professional legitimacy of a different occupational group.

While recognizing the appropriateness, at the time, of some of the recommendations he made, it is time for Abraham Flexner's pronouncements to be demythologized. The institutional structure of social work, and the content of social work education, should reflect the functional requirements of social work professional practice, rather than a set of arbitrary criteria set forth seventy years ago. We should also cease imposing an image of intellectual unity on a profession that is marked by a diversity of theoretical perspectives and a diversity of professional tasks.

The societal function of any single profession cannot be understood within some general category of occupations labeled as professions. The recognition of any occupation as a profession by its own participants and by others depends largely on the societal importance of the tasks that are performed, the role of individual judgments in carrying out those tasks, and the degree of preparation, including mastery of specialized bodies of knowledge, that is required to make consistent and wise judgments. Moreover, it must be recognized that any profession, and particularly a major profession such as social work, includes within the scope of activities carried out by its members a variety of tasks related to professional practice. Some of these, much like the giving of hypodermic injections by doctors, do not have distinctive professional characteristics and do not need to be rationalized as being professional.

While some members of the profession continue to agitate over the issue of professionalism and our ability to conform to the Flexner mandates, the diversity of settings in which social workers are employed continues to increase. While social work jobs have decreased in some

areas as a result of budget cuts and declassification, new opportunities are opening up in other areas such as employee assistance programs and the wide variety of community care programs for individuals with chronic conditions. In spite of the Flexner characterization of the mediating tasks of social work as "not-professional," both case-management and social care activities are becoming increasingly significant areas of professional practice, enhancing, rather than diminishing, the status of the profession. Much of the past consideration of the status of social work has been marked by frequent glances over our shoulder watching for the ghost of Dr. Flexner. It is time to exorcise his ghost and turn our attention to the significant issues that emerge from the distinctive societal responsibilities of professional social work.

Notes

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1 James Leiby, *History of Social Welfare and Social Work in the United States* (New York: Columbia University Press, 1978).

2 Ibid., pp. 129–30, also see Melissa Hield, "The Ladies of Chicago: Women, Social Reform and Social Work, 1920–1934" (Ph.D. diss., University of Texas at Austin, 1981).

3 For example, see Florence Waite, *A Warm Friend for the Spirit* (Cleveland: Family Service Association of Cleveland, 1960). Chapter 3 deals with the beginnings of agency-based training at the Cleveland Associated Charities.

4 Mary Richmond, "The Need of a Training School in Applied Philanthropy," in *Proceedings of the National Conference of Charities and Correction, 1897* (Chicago: Hildmann Printing Co., 1897), pp. 181–86.

5 Elizabeth Meier, *A History of the New York School of Social Work* (New York: Columbia University Press, 1954).

6 Ibid.

7 Daniel Fox, *The Discovery of Abundance: Simon H. Patten and the Transformation of Social Theory* (Ithaca, N.Y.: Cornell University Press, 1967).

8 Simon Patten, *The New Basis of Civilization* (New York: Macmillan Co., 1921).

9 Lela B. Cosun, "Edith Abbott and the Chicago Influence on Social Work Education," *Social Service Review* 57 (March 1983): 94–111.

10 Meier.

11 Cosun, p. 102.

12 Meier.

13 Ibid., p. 40.

14 Edward Devine, "Education for Social Work," in *Proceedings of the National Conference of Charities and Correction, 1915* (Chicago: Hildmann Printing Co., 1915), pp. 606–10.

15 Ibid., p. 609.

16 Ibid.

17 Roy Lubove, *The Professional Altruist: The Emergence of Social Work as a Career, 1880–1930* (Cambridge, Mass.: Harvard University Press, 1965).

18 Abraham Flexner, *I Remember* (New York: Simon & Schuster, 1940).

19 Ibid., chap. 14.

20 Abraham Flexner, *Medical Education in the United States and Canada* (1910, reprint ed., New York: Arno Press, 1972).

21 Flexner, *I Remember*, chap. 4.

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25 *Ibid.*, p. 53.

26 Flexner, *I Remember*, chaps. 18, 19, 20.

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28 *Ibid.*, p. 581.

29 *Ibid.*, p. 576.

30 *Ibid.*, p. 585.

31 *Ibid.*, p. 586.

32 *Ibid.*

33 *Ibid.*, p. 587.

34 *Ibid.*, p. 588.

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37 *Ibid.*, p. 589.

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41 Meier, p. 46.

42 Flexner, "Is Social Work a Profession?" p. 583.

43 Howard M. Vollmer and Donald E. Mills, eds., *Professionalization* (Englewood Cliffs, N.J.: Prentice-Hall, 1966), p. 2.

44 Alexander M. Carr-Saunders and P. A. Wilson, *The Professions* (Oxford: Clarendon Press, 1933).

45 William J. Goode, "The Theoretical Limits of Professionalization," in *The Semi-Professions and Their Organization*, ed. Amitai Etzioni (New York: Free Press, 1969), pp. 266-313.

46 The "recognition" of professions is always by a specific author who interprets the meaning of public recognition in an idiosyncratic manner.

47 Julius A. Roth, "Professionalism: The Sociologist's Decoy," *Sociology of Work and Occupations* 1 (1971): 6-23.

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50 Martin Rein and Sheldon H. White, "Knowledge for Practice," *Social Service Review* 55 (March 1981): 1-41.

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- 71 See the special issue on Conceptual Frameworks, *Social Work*, vol. 22 (September 1977), and Conceptual Frameworks II, vol. 26 (January 1981)
- 72 Flexner, "Is Social Work a Profession?" p. 583
- 73 Herman Borenzweig, "Social Work and Psychoanalytic Theory: A Historical Analysis," *Social Work* 16 (1971): 7-16
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- 75 Devine (n. 11 above), p. 610
- 76 Cosim (n. 9 above)
- 77 For a debate on the role of logical empiricism in social work research, see Martha B. Heneman, "The Obsolete Scientific Imperative in Social Work Research," *Social Service Review* 55 (September 1981): 371-97, and John R. Schuerman, "The Obsolete Scientific Imperative in Social Work," *Social Service Review* 56 (March 1982): 111-45
- 78 Richard L. Crow and Kenneth W. Kindelsperger, "The Ph.D. or the D.S.W.?" *Journal of Education for Social Work* 11, no. 3 (1975): 38-43, and Maurice B. Hamovitch, "The Ph.D. versus the D.S.W. in Social Work" (paper presented at the meeting of the Group for the Advancement of Doctoral Education in Social Work, Philadelphia, 1982)
- 79 Ernest Greenwood, "Attributes of a Profession," *Social Work* 2 (1957): 45-55
- 80 *Ibid.*, p. 45
- 81 Amitai Etzioni, ed., *The Semi-Professions and Their Organization* (New York: Free Press, 1969)
- 82 In particular, see Richard L. Simpson and Ida H. Simpson, "Women and Bureaucracy in the Semi-Professions," in Etzioni, ed., pp. 196-265. All of the other chapters, and the introduction by Etzioni, reflect a similar perspective.

Life after Welfare: AFDC Termination among Long-Term Recipients

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This study explored the experiences of thirty-one women AFDC recipients who became ineligible for AFDC benefits when their youngest child passed the age of entitlement. Findings concerning changes from pre- to posttermination suggest that although average income remained about the same, 56 percent of the respondents experienced income decreases. There was a significant increase in health problems over time. Women's perceptions of psychological well-being and coping strategies, as well as factors associated with their final status, are examined, and limitations of current welfare policy regarding this group of women are discussed.

The declining and unequal economic condition of women relative to men is, by now, almost common knowledge. Indeed, the growing number of women who find themselves at risk of becoming poor has prompted the widespread use of the descriptive term, the "feminization of poverty."¹ The incidence of poverty among women who are single heads of households is a particular cause of concern. Between 1970 and 1979, as the numbers of families in general increased by 12 percent, families consisting of women and their dependent children grew by 51 percent.² In 1980, one-third of the 9 million female-headed families were poor. These families comprised approximately 50 percent of all poor families. Among families headed by black women or women of Spanish origin, the likelihood of being poor was one in two.³

There is another related group of women that is also in serious economic jeopardy: women who have devoted most of their lives to

unpaid labor in the home and have limited employment options because of advancing age, little or no experience in the labor force, or low levels of the skills necessary to compete for jobs that lead to self-sufficiency. As a result of divorce, separation, death of their husbands, or loss of Aid to Families with Dependent Children (AFDC), these "displaced homemakers" must precipitously cope with the necessity of self-support.⁴

This article is based on the AFDC Transition Project undertaken to describe the experiences and reactions of women who become ineligible for AFDC benefits when their youngest child reaches eighteen years of age. Although concern for poor women in general appears to have increased, no one seems to know what happens to single-parent women once public support is terminated and they move from being a single-parent householder to displaced homemaker. Extrapolating from research findings on personal reactions to life transitions⁵ and using common knowledge about the difficulties of getting along with limited incomes, one might assume that AFDC termination is stressful and, in the absence of social supports and personal stamina, could easily lead to increased poverty and a sense of personal futility. Nonetheless, there are no current program or policy provisions for systematically helping women make this transition.

The data reported here were collected in a series of in-depth interviews with thirty-one women living in south central Wisconsin. Each woman was interviewed in her home three times. T_1 , two months prior to; T_2 , near; and T_3 , two months after the time she became ineligible for AFDC because of her youngest child's age. A brief fourth interview (T_4) was conducted via the telephone with most of the sample one year to eighteen months after termination of AFDC benefits. This final interview was designed to retrieve long-term follow-up information on selected variables. Following women through their transitional experiences was undertaken to determine how life situations changed from pre- to posttermination and whether patterns of coping, life-stress, or psychological symptoms emerged over time. The overall intent was to conduct an intensive, exploratory investigation of a small sample of women that would both provide detail about women's social and psychological situations as they proceeded through the AFDC transition and yield information about their post-AFDC circumstances. This study is viewed as a beginning step in a long-range effort to determine the personal-situational characteristics and events that positively influence women's ability to cope with demands for self-support.

Method

Sample

The names and addresses of women who were receiving AFDC benefits and whose youngest child was seventeen years old (and thus would

become ineligible for AFDC during the next year) were provided by the Wisconsin Division of Economic Assistance. The potential subject pool was limited to women living in Wisconsin counties whose Departments of Social Services had provided information about AFDC recipients to the newly organized central data bank and to women in counties in closest proximity to Madison, the home base of the project. The intent was to recruit a sample of approximately thirty women. This number was arrived at in an effort to both work within the limited resources of the research staff and obtain a reasonable number of women for intensive study. A sample of convenience was chosen by successively contacting all eligible women living in the city of Madison, then Dane County, and then the closest outlying counties until thirty-one women agreed to participate in the study. Although results are not generalizable to a definable population of AFDC women with eighteen-year-old children, they apparently provide the first systematic information about this group of recipients.

Potential participants were first sent a letter describing the project and then phoned and asked if they were willing to be visited by an interviewer to receive further information. Several women could not be located, but of the thirty-five contacted, only four declined a visit. In the first personal contact, interviewers provided additional explanation of the purposes and procedures of the study, answered questions, and asked women who wished to participate to read and sign an informed consent statement. All women who agreed to a first visit also agreed to participate in the study. Women were offered a token financial incentive of \$10.00 for participating in the first field interview and \$5.00 each for the second and third interviews. Three respondents eventually withdrew from the project before their series of field interviews was completed, two because of illness, and one because of disinterest. Two more women did not wish to participate in the follow-up telephone interview, and another two were not located for this final interview. Actual numbers of women who participated in each interview are: $T_1 = 31$, $T_2 = 28$, $T_3 = 29$, $T_4 = 25$.

Data Collection

As previously noted, each woman was interviewed in her own home at three intervals and contacted by telephone for a fourth brief interview. Interviews were conducted according to semistructured schedules designed to yield information about three major categories of variables: (1) psychological coping strategies and social resources, (2) personal well-being, and (3) demographic and personal characteristics. Interview schedules for each time period contained numerous identical items to allow comparisons across time. Beyond obtaining responses to standardized measures of coping and adjustment, the interview schedule also allowed many opportunities for women to express their individual

views and feelings about this time in their lives. The current report focuses on recounting changes in women's situations from T_1 to T_3 , particularly work, health, income, and psychological changes, and identifying characteristics associated with final status on these major variables.

Research interviewers were all women and, in most cases, graduate students at the University of Wisconsin—Madison School of Social Work. Whenever possible, respondents were seen by the same interviewer for all three field interviews. The telephone interviews were all conducted by the same person. For the most part, women seemed to respond to the researchers with trust and openness. But, because data are based on women's perceptions and recollections, they may be influenced by flaws of human memory as well as factors of expectancy, demand, and motivation to respond in a socially desirable fashion. Unfortunately, systematic procedures for assessing the extent of such extraneous influences were not established. On the other hand, interviewers followed up on inconsistencies in reporting within and across interviews in an attempt to clarify whether they represented inaccurate reporting or true changes in circumstance. To further limit response errors, researchers attempted not to influence the women's planning for self-support. Nonetheless, it is clear that the interviewing process often prompted planning and problem solving about future survival. In situations in which women were still overcome with numerous crises and uncertainties by the end of the field-interview series, it seemed irresponsible not to share potentially helpful information with them, and so researchers did help selected women with problem solving subsequent to the third interview.

Findings

Personal Characteristics

At the first interview, three months prior to AFDC termination, the mean age of the women was 49.6 years. Ages ranged from thirty-three to sixty-two. A majority of the women (52%) were in their fifties, and another 39 percent were in their forties. The racial heritage of the women was predominantly white (71%). Comparisons with the racial composition of Wisconsin AFDC recipients indicate that white women were slightly overrepresented in the project sample, but, in general, the sample reflects the racial makeup of state recipients.⁶ Thirteen women lived in small towns, nine lived in small cities, eight lived in urban areas, and only one woman resided in a rural location. When

we first met them, twenty-nine of the women respondents were single and two were married and living with their husbands (both husbands were unemployed and one was receiving veteran's benefits). Ten of the single women reported current relationships with men. Twenty-three of the single women were divorced as opposed to being informally separated. Only one woman reported never having been married. The mean age at the time of their first marriage was 21.7 for women who had been married, and ages at first marriage ranged from sixteen to fifty-one. Approximately half of the women said they would like to remarry, but few believed they ever would. Indeed, with the exception of one respondent who remarried between T_1 and T_2 , the women's marital and relationship statuses remained the same over the course of their involvement with the project.

Over half of the respondents were born in and spent most of their lives in Wisconsin. Twenty-two percent were born in the South and migrated to the Midwest, usually as young adults. Twenty women were reared by both natural parents. The remaining eleven were reared either by grandparents or other relatives. All but one of the women's fathers or father substitutes had been steadily employed, albeit at low-paying jobs, and twenty-one mothers or mother substitutes also worked outside the home, at least part-time, during the respondents' childhoods. The modal occupation for fathers and for mothers was agricultural work. Despite the fact that over half of the women recalled that their families of origin had a hard time "making ends meet," only three original families were ever dependent on welfare.

Project women had an average of five children, who ranged in age from thirteen to forty-four.⁷ When we first met them, most women were living in households made up only of themselves and their youngest child. On average, women gave birth to their first child when they were age twenty and had their last baby at thirty-one. Because women did not have children beyond this relatively early age, their behaviors do not support the popular view that welfare mothers have as many children as possible to extend their eligibility for benefits.

Twenty-eight of the women raised their children by themselves without financial, emotional, or other practical support from the children's fathers, extended family, or others. Nine former husbands had made intermittent child-support contributions since dissolution of marriages. At the T_1 interview, however, only three women reported having received child-support payments the previous month. The average of these two figures is roughly comparable to the 23 percent of Wisconsin AFDC recipients receiving any child support payments in 1979.⁸ About half of our respondents wanted fathers to help more, both financially and emotionally, and the other half simply wished the father would "keep out of the picture" because of the potential for conflict between women and their former husbands. A few women

did not want to "hound" these men for support payments, perceiving that they had no financial resources to share.

Youngest children.—Although twenty-five women reported satisfaction with the way their eighteen-year-old was managing his or her life at both post-AFDC interview times, and rated themselves as only moderately worried about their children, when asked specifically, several women (eleven at T_3 and sixteen at T_4) did voice concerns about their child's current and anticipated future status. In particular, they worried about their children's ability to find work in the present job market and whether additional job training could be afforded. Other less frequently mentioned concerns centered around children's physical and mental health, illegal activities, drug and alcohol problems, and early marriage and parenting obligations. Except for a handful of women who were longing for the peace and quiet they thought they would have if their kids would move out, most seemed content to continue to offer a home to their children. Some obviously hoped that their kids would stay home, find a job, and help share expenses and household responsibilities with them.

Over the course of our contact, a few children got jobs and a few children lost jobs, so that from T_1 to T_4 , there was only a small increase in the number of eighteen-year-olds working (see table 1). Job instability among these children seemed relatively common. Once they found jobs, it was hard for them to stay employed. Much of the work they obtained was seasonal or otherwise viewed as temporary. The jobs they accepted included housekeeping or janitorial work, pumping gas, cooking, cashiering, busing tables, working in food-processing factories,

Table 1

YOUNGEST CHILD'S STATUS T_1 AND T_4

STATUS	NUMBER OF CHILDREN	
	T_1 ($N = 32$)*	T_4 ($N = 26$)*
Living		
Mother	27	18
Other	1	7
Work		
Full-time	0	3
Part-time	9	9
Unemployed	22	13
School †		
Completed		6
Attending	16	11
Did not finish	9	5
Marital		
Married	0	2
Single	32	24

* N includes one set of twins. There are missing cases for several categories.

†School status refers to high school, technical school, or work toward GED.

and clerical work. One woman reported that her daughter had followed up on fourteen job leads in a two-week period and found nothing. As reflected by table 1, sixteen teenagers were still in school at T_1 (twelve in high school, one in vocational school, three working on GEDs) and nine had permanently or temporarily dropped out of school. By T_1 , six teenagers had completed high school, five reported having given up, and remarkably, eleven were still pursuing some form of education, including two of the original nine who dropped out (four were working on GEDs or were attending high school, six were attending vocational school, and one was in college). Two of the eighteen-year-old girls were married over the course of the project. Both had babies. At the time of our last contact, an additional unmarried young woman was pregnant and another had given birth to a child.

Education—Respondents were not particularly well educated. Their mean educational level was 9.7 grades. Less than half of the women had completed high school. Nineteen women had participated in training and/or educational programs as adults—eleven of which were related to the Work Incentive Program (WIN). Two women were attending school at the time of the first interview. By the end of the interview series, one of the women had finished her technical school courses (sewing, cooking, typing) and the other was continuing her studies at a state university. In the interim, three additional women started and completed job training courses (bus driving for the elderly, baker's school, and a CELIA workshop on office skills). In the first two instances, the training led to employment; in the latter case, the woman had not been able to find work. She said she was supposed to apply for eight jobs per month, but could not because she was often unable to afford gas for her car in order to get to interviews. Two other women had taken short courses related to improving current job skills, and one woman started and then dropped out of a vocational program because it was "too much" for her. Overall, six women sought additional education or training in order to improve job prospects during the eighteen to twenty-four months encompassing project contact.

Welfare history—The mean number of years women received AFDC benefits was 8.96. The range of the time was from six months to twenty years (see table 2). As expected, the length of time on assistance is greater for the current sample than for Wisconsin AFDC recipients in general, for whom the average reciprocity time is 3.2 years.⁹ More than 50 percent of the women were in their forties and fifties when they first received AFDC, and 75 percent of them had at least one benefit interruption or reduction over the years. The mean number of interruptions was 1.4, and the range of interruptions was from zero to six. At the first interview, the average AFDC monthly grant was \$236.17. Grants ranged from \$14.00 to \$529.00. The most common reason for women's initial AFDC eligibility was desertion by, or divorce

Table 2

YEARS ON WELFARE SINCE AGE 18

Years	N
Less than 1 year	3
1-4 years	8
5-9 years	6
10-14 years	4
15-20 years	10

or separation from, their husbands. Only one woman became eligible for services because of the birth of an out-of-wedlock child. In addition to AFDC, project women reported having received a range of other welfare benefits over their adult years.

Of primary interest are patterns of welfare utilization when AFDC ceased. At the final follow-up, seven women were relying on public assistance as a major means of support. Three were receiving Supplemental Security Income (SSI), three were receiving General Assistance, and one reported income from both SSI and General Assistance. Four women derived their major financial support from non-means-tested income support programs, including Unemployment Insurance and Social Security retirement or disability insurance. Several women were also receiving one or a combination of supplementary benefits: energy assistance, medical assistance, or food stamps. Half of the women in the sample had applied for various benefits but had been judged ineligible for any.

Employment.—Seventeen women worked outside the home at the time of the first interview, primarily in jobs of low occupational status such as clerical, sales, light manufacturing, domestic, and service. Modal occupations were housekeeping/maid work and factory work. Comparison with the percentage of Wisconsin AFDC caretaking relatives who are employed and whose youngest child is sixteen (39%) indicated higher rates of employment for the study sample.¹⁰ The mean number of hours project women worked per week was 31.4 hours, with a range of two to fifty-one hours per week.

All but one of the women we talked to had worked outside the home off and on (an average of 6.5 jobs) during their adult life. During the last ten years, women had been employed for a mean and median of three to five years. Even though women received small increases in wages over the course of jobs and years, the cost of living increased more rapidly than their wages, and women's wage-related buying power steadily decreased.

Most of the fourteen women who were not working outside their homes at *T*₁ said that their unemployment was either because of ill health (61.5 percent) or unavailability of jobs. All but one of the un-

employed women said they would take any job they could find. Even in the face of previous failures of the "job solution"—inability to find work, low wages, lack of job-related benefits, and deteriorating health—twenty-one women had hopes of finding new jobs or better jobs as a way to make up for the loss of AFDC.

There is little, however, in the employment histories of most of the women in the sample to suggest they would be able to successfully compete for jobs that would provide them with a living wage. Although, as noted, many of our subjects held semipermanent positions as assembly line workers, maids, or clerks, they have rarely made enough money at these jobs to support themselves nor have they found opportunities to advance to other more lucrative positions. And now, as they enter their fifties and sixties, they feel increasingly incapable of meeting the physical demands of the only kinds of jobs they have ever had or probably can expect to have. There are, of course, exceptions to this circumstance. But close examination of even those "exceptional cases" shows that women who initially appeared to be relatively well-off in terms of work and wages are struggling to barely manage.

The number of women employed decreased by four over the eighteen-month to two-year period between T_1 and T_4 . Two previously unemployed women did manage to find jobs during this time, but three others lost jobs, so that the proportions of employed and unemployed remained essentially the same.¹¹ Of this latter group, five were making more money on their jobs at T_4 . During this same time, however, four other women had working hours cut and were receiving less money. New or additional employment included clerical, salesperson, child-care, and factory work.

Income.—Women's self-reported wages, AFDC and other public assistance and social insurance benefits, cash equivalency of food stamps, child-support payment, and all other sources of income at T_1 amounted to an average gross monthly total income of \$542.61. The T_1 per capita monthly income was \$253.06. Average yearly income for the pretermination year was \$6,511.32. Women's median pretermination income of \$5,664 was only 54 percent of the \$10,408 median income reported for all female householders with absent husbands in 1980 and was a mere 27 percent of the \$21,023 median income reported for all families in the same year.¹² When project women are compared to other householders in the age range from forty-five to fifty-four, income discrepancies are even greater. Project women's income was 40 percent of the median income of female householders and 21 percent of the median income of all families in this age group.¹³

Mean hourly gross pay for the current job at T_1 was \$3.18. This reported average salary was only slightly more than the 1980 minimum wage of \$3.10. Seven of the seventeen employed women were actually

earning salaries below the minimum wage. Women's pay ranges were from \$1.00 to \$5.26.

In addition to little income, twenty-two women said they had fairly substantial debts. The mean amount owed was \$7,223. This figure is somewhat inflated by home mortgages held by a few women. Excluding them, seven other women had debts in excess of \$5,000. The modal category was from \$100 to \$500. Many of the women reported that it was not uncommon for them to run completely out of money during the course of a month. Sixty-five percent of the respondents reported that they had been "flat broke" from two to six times in the last six months. In answer to a question about what they would do if they had a little extra money, most women said that they would use the money to buy groceries and pay bills.

As reflected by table 3, at the final interview women were in about the same economic straits as they had been initially. Over the almost two-year project period, while living costs rose steadily, women's incomes remained essentially the same—gross monthly income at T_4 was slightly less than it had been at T_1 . There was a gradual decline in income from T_1 to T_3 (the average income loss was \$155.46) and then an increase from the immediate (T_3) to long-term (T_4) post-AFDC follow-up period (the average gain was \$130.72). Overall, from T_1 to T_4 , women's gross monthly income decreased by an average amount of \$24.74. The more dramatic post-AFDC income decrease that women experienced at T_3 was partly remediated by T_4 , primarily through increases in income from public assistance and social insurance programs and from family members. But, examination of actual income increases and decreases shows that from T_1 to T_4 fourteen women experienced average income decreases of \$200 and ten women benefited from average increases of \$190. Per capita figures show an average gain of \$10 from T_1 to T_4 . This increase resulted from a reduction of numbers of people dependent on the income over the same time period.

New sources of income most often utilized post-AFDC were General Assistance, SSI, and children. As expected, the number of women receiving child support or whose children received Social Security survivors benefits diminished over time. Women were evenly split in terms of whether they derived the major portion of their income from employment or from government financial aid programs. Women whose major income source was employment had the highest T_4 incomes, followed in descending order by those whose major source was family, public assistance, and social insurance.

Mean hourly pay for employment at T_4 was \$2.94 per hour. This figure represents a 24¢ decrease from T_1 and 41¢ less than the 1982 minimum wage. So, not only were fewer women working at the final contact, but they were, on average, earning a smaller hourly wage.

Table 3

MEAN TOTAL INCOME, MEAN PER CAPITA INCOME, AT T_1 , T_2 , T_3 , AND T_4

Source	T_1	N	T_2	N	T_3	N	T_4	N
Total	542 62	29	499 80	15	387 16	26	517 88	25
Per capita	253 06	29	316 22	15	207 13	26	263 07	25
Source								
Work	433 35	17	411 11	18	404 56	16	423 07	13
AFDC	236 17	29	258 76	13	206 33	3		
Food stamps	49 18	9	73 33	9	101 35	14	78 87	8
Other	144 78	14	152 91	12	927 46	15	400 70	17

NOTE.—Figures for total and per capita income omit women not receiving AFDC at T_1 and women still receiving AFDC at T_2 and T_3 . Omissions include $T_1 = 2$, $T_2 = 13$, and $T_4 = 3$. Three women at T_3 and one woman at T_4 who reported living on small incomes of their own (less than \$50 00) plus loans of an unspecified amount from friends and family are included in total and per capita amounts

Clearly, the "job solution" did not become more viable post-AFDC. Even though women working outside the home were doing somewhat better financially than women with other major income sources, their yearly median income of \$7,506 still did not compare favorably with the \$10,408 median income reported by the Bureau of Census for woman-headed families in 1980. Examination of the ratio of the contribution of various income sources to total income at T_1 shows that the largest percentages of overall income came (in descending order) from work, public assistance, social insurance, and family members.

Certainly many women felt strapped with their T_1 and T_2 incomes. At the last contact, fifteen women were behind in paying monthly bills. Not unlike other persons with limited incomes, women used a variety of strategies to "get by." One woman was rotating payment of utilities: gas one month, electricity the next, and then the telephone. Another had her car repossessed, and many were still worried about paying doctor bills and being able to buy ongoing health care. Average indebtedness decreased from \$7,223 at T_1 to \$4,792 at T_2 , but twenty-one women reported debts ranging from \$55 to \$50,000 at the final contact. The high end of this range continued to be inflated by a few home mortgages. The modal amount owed was still in the \$100 to \$500 category.

When women were asked to tell us about the specific things they had done to manage on limited incomes at T_1 , over half of them mentioned consciously limiting expenses by cutting back on food, visits to the doctor or dentist, and use of heat and electricity. Susan Benjamin is one of the women whose income decreased from T_1 to T_2 . She is fifty-five, white, and has a tenth-grade education. Her inability to find a job and her discouragement about that was not atypical.

When you reach your fifties, there's not much out there. I've been everywhere looking for jobs. Waitressing is all I'm good at and they want young girls. It's awful not having anything . . . you lose more pride. I constantly have to ask people for favors not knowing if I can ever pay them back. It gets me very depressed. I feel isolated. I've sold my "treasures" that I've had for years. I've given up friends because I can't afford to go anywhere with them. I've spent the majority of my life keeping the house clean and the kids in line because I thought that's what they were looking for. I never really thought about a career for myself, learning to type or anything. Now I'm up a creek. I can keep house just great, but nobody pays for that.

Health—At the first interview, twenty-five women described numerous personal health problems. They talked most frequently about high blood pressure, arthritis, back trouble or other vague aches, and "nerves"—most often depressed feelings or more serious depressive disorders. Slightly more than half of the women had sought professional help for psychological or interpersonal problems at some point in their adult lives. Only one woman had ever been hospitalized for

mental health reasons. Although ten women thought they had problems serious enough to warrant psychotherapeutic intervention at T_1 , only one of them was receiving mental health services. However, one-third of the women in the sample reported taking prescribed psychotropic medication: minor tranquilizers, antidepressants, or sleeping medication.

Twenty women reported additional health problems or worsening symptoms at T_1 , three reported lessening of symptoms, and another two reported no change in health status. Some of the new problems appeared to be relatively minor, but many were of a more serious nature (e.g., cancer, major surgery, diabetes, mental health problems). As already noted, four of the twenty-five women interviewed at the final follow-up had serious enough health problems to become eligible for SSI. A t -test of the differences between mean number of problems, weighted for severity, at T_1 ($\bar{X} = 2.55$) and T_4 ($\bar{X} = 4.24$) shows that the reported deterioration of health is statistically significant ($t = 4.99$, $P < .001$).

The relative contributions of ongoing stress and normal aging processes to the health deterioration women reported over the course of our contact cannot be determined by this study. But whatever the cause of increasing health problems, many women were faced with the serious dilemma of having limited or no means of paying for health care at the precise time they needed it most. Eleven women relied exclusively on their own (or their children's) financial resources to pay medical bills. As a result, several reported being in debt for past services and attempting to limit expenses by simply not seeking further medical or dental services. Eight women participated in some type of medical insurance plan in which premiums were either paid by themselves or their employers. These plans varied in terms of comprehensiveness of coverage. At least three of the eight had to pay for all outpatient services themselves. An additional six women were able to rely on SSI or Medical Assistance for payment of most medical expenses.

Psychological well-being.—Each woman's sense of well-being was assessed using four brief self-report scales that measured psychological symptoms, self-esteem, worries about life problems, and quality of life. Three of the instruments were administered as part of the field interviews at T_1 , T_2 , and T_3 , and selected items from the Problems, Upsets, and Worries Scale were administered at all four interviewing times.¹¹ T -tests indicated that psychological well-being scores remained relatively stable across interviews and that, on average, women were not reporting significantly more symptoms, lower self-esteem, more worries, or lower quality of life post-AFDC.

The Brief Symptom Inventory (BSI), a short version of the Symptom Checklist, Revised form (SCL-90-R), is comprised of fifty-three items subsumed under nine symptom dimensions: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility,

phobic anxiety, paranoid ideation, and psychoticism.¹⁵ In addition to subscale scores, the BSI provides three global indices of distress: the Global Severity Index (GSI) is the mean inventory score, the Positive Symptom Total (PST) provides a count of the symptoms endorsed, and the Positive Symptom Distress Index (PSDI) reflects the average intensity of responses

According to the BSI, project women scored highest on the depression, anxiety, obsessive-compulsive, and somatization subscales, and reported significantly higher levels of psychological symptoms than a normative nonpatient group of 480 women on the Global Severity Index ($t = 4.5$, $P < .05$) and the depression ($t = 4$, $P < .05$), anxiety ($t = 6.28$, $P < .05$), and somatization ($t = 3.82$, $P < .05$) subscales.¹⁶

Rosenberg's Self-Esteem Scale was used to measure the women's levels of self-acceptance.¹⁷ This brief inventory consists of ten statements that express general feelings about the self. These items are then combined and weighted to produce a Guttman Scale, with a possible score of zero to six. According to Rosenberg, scores of zero to one indicate high self-esteem, scores of 1.5 to 2.5 indicate medium self-esteem, and scores of three to six indicate low self-esteem. Mean scores for project women put them into the medium self-esteem range at all three interview times. There was no significant difference between the distribution of project women's scores and those of a normative sample of female high school students collapsed across social class as reported by Rosenberg

Quality of Life was assessed by Campbell and associates' ten-item bipolar adjective checklist.¹⁸ According to this measure, respondents indicate the extent to which adjectives of a pair (e.g., "boring-interesting," "easy-hard") are descriptive of their lives. Scores may range from one to seven with lower scores indicating perceptions of greater quality of life. Women's average ratings indicate that they viewed their lives as reflecting medium quality at each of the three assessment times.

Employing a measurement format developed by Makosky,¹⁹ researchers asked women to use a scale of zero to ten to estimate the extent of problems, upsets, and worries (PUWs) experienced in various areas of their lives, including income, family-of-origin relationships, health, mental health, employment, friendships, and relationships with children. Women made PUW estimates for all seven areas at T_1 , T_2 , and T_3 , but only for income, health, employment, and children at T_1 . Examination of combined PUW scores for these four areas indicates moderate levels of concern that diminished slightly over time. Women's most intense worries across time were in the areas of income ($\bar{X} = 6.37$), work ($\bar{X} = 4.48$), and health ($\bar{X} = 4.58$).

Given women's exposure to a heavy dose of what might commonly be agreed upon as "hard times," one might have expected that they would feel pessimistic about their lives and their ability to exert influence,

feel bad about themselves, be beset with worries and concerns, and manifest serious psychological symptoms. As noted, women did show elevated levels of psychological symptoms, but at the same time they reported moderately positive perceptions of self-worth, tended to view their lives as not particularly positive or negative, and overall were only moderately upset or worried about their circumstances. Although it is possible that these relatively positive appraisals were inflated by measurement error, including social desirability response bias, it seems equally likely that women developed a kind of "grin and bear it" response set toward life.

Coping.—In order to determine how women managed their hard times, coping was studied in terms of both general coping competence and the specific ways women coped with AFDC transition.²⁰ In general, however, women's responses to two paper-and-pencil measures of coping, a brief version of the Behavioral Attributes of Psychosocial Coping Inventory (BAPC)²¹ and the Means-Ends Problem Solving Test (MEPS),²² indicate a moderate level of coping ability. An additional three-item scale developed by Beukema and associates²³ asked women to evaluate the overall success of their coping. Mean scores suggest that the women felt they were "holding their own."

Considering social networks as having the potential for validating self-esteem and providing practical help in the face of scarce and declining resources, researchers asked women to describe their social ties. On average, women were able to list about ten persons (six, excluding children) whom they considered important to them. Social networks appeared to be generally tight knit since an average of 82 percent of each woman's possible social network pairs knew each other. Women's relatively high scores on the emotional support and practical help scales suggest that, in general, they felt that they had persons upon whom they could rely for support of both a practical and emotional nature.

Termination problems and plans.—The specific problems women anticipated in conjunction with AFDC termination were primarily financial ones: they didn't know how they were going to be able to live—pay rent, help out their kids, pay bills, or find a job with an adequate salary. Other problems related to concerns about health and children (see table 4). Women were asked about anticipated problems at T_1 and then about additional problems they had encountered in the interim at T_2 and T_3 . Thirty women could think of at least one termination-related problem at the initial interview. Seven women reported having encountered additional problems when we talked to them again at T_2 , and five women reported new problems at T_3 . On average, women specified 2.76 problems over the course of the first three interviews.

The most frequently considered solution to problems was finding work as a way to increase income and alleviate financial problems. As

Table 4

ANTICIPATED TRANSITIONAL PROBLEMS

	Problem Categories*	N
Financial		
General		24
Medical		8
Housing		6
Work		11
Kids		3
Health		4
Children		5
Loneliness		4
Unspecified discouragement		2
Other		3
No problems		1

*Categories not mutually exclusive

noted earlier, limited education, job skills, and job experience, coupled with rising unemployment, made this particular solution improbable.²⁴ Indeed, only two women found employment over the course of our contact, while three women lost jobs. It may be that the “get-work” solution came readily to mind when asked about coping with financial deficiencies, and in the absence of other solution ideas was offered up, its unlikelihood notwithstanding. Nine women mentioned getting financial help from other people, usually family members or a boyfriend. Five women ended up relying on financial contributions from family members for most of their income at *T*₁. Nine women were planning on receiving further government aid, in most cases SSI or General Assistance. At *T*₁, ten women were actually depending on some form of social insurance or public assistance for their major means of support. Heroically, another small group proposed that they might obviate the need for health care by staying healthy. As reported earlier, 80 percent of the women experienced deteriorating health over time. Eight women proposed “solutions” that were simply reiterations of the problem, a need to find solutions, or protests of worry and helplessness. As such, these responses were coded as “no solutions.” Table 5 gives the distribution of solutions enumerated at *T*₁. Over the next two interviews (*T*₁, *T*₂), fourteen women proposed additional solutions, all of which could be subsumed by the solution categories listed in table 5.

Following the reasoning of Platt and Spivack,²⁵ who emphasized the relationship between the number of problem-solution means conceptualized and successful problem solving, we attempted to index the specificity of respondents’ solution-generation thinking by asking them to describe the steps they would need to take to achieve each proposed solution. Each discrete step that was judged as having reasonable po-

Table 5

SOLUTIONS PROPOSED AT T_1 (Total $N = 30$)

Solution Categories*	N
Get work/raise/promotion	21
Get financial help from others	9
Government assistance	9
No solutions	8
Sell house/move/sell possessions	7
Stay healthy/take care of self	6
Self-assurance/diversions	4
Get medical insurance	3
Professional advice	2
Budget	2
Other	2
Find a man	1

*Responses not mutually exclusive

tential for advancing solution achievement was counted. Although respondents enumerated a range of problem-solving steps (zero to seven), on average, women were able to conceive of about a step and a half to support each solution.

During the second and third interviews, women were asked to use a five-point scale to estimate the extent to which they had accomplished previously specified solutions and solved their problems. Mean ratings at T_2 and T_3 indicate that problems were only minimally to partially solved. By T_4 , only five women managed to substantially or completely solve all of their problems. Most women's efforts yielded gains in the "none" to "minimal" range. On the other hand, women's average confidence-to-cope scores, the points on a 100-point scale that women chose to reflect how much confidence they had in their ability to cope with AFDC termination problems, remained moderately high over the first three interviews.

The women's general failure to conceptualize and successfully carry out detailed problem-solving plans with respect to AFDC termination is especially remarkable given that they seemed to possess requisite coping skills, attitudes, and positive expectations as reflected by the global coping measures (BAPC, MEPS, and Coping Competence Scale). This discrepancy suggests that even though women know how to actively problem solve in the abstract, they found the process much more difficult in their current lives, where problems may have been intractable and constraints overwhelming. As Lazarus and others point out, it is counterproductive to continue to make instrumental responses to control one's circumstances when outcomes are not related to personal effort. "Effective functioning . . . is based on the ability both to stop trying when effort is pointless and to recognize a new situation in which effort would pay off."²⁶ Our findings do not imply that women

did not cope, or that they did not ultimately find solutions (however satisfactory or unsatisfactory), but rather that they experienced only partial success in achieving the solutions they specified

Influences on Post-AFDC Adjustment

Clearly this study does not allow for delineation of factors causing women's financial, employment, health, or psychological status at the final contact. Correlational analyses do, however, suggest hypotheses about influential variables that may warrant further exploration. Correlations were calculated using Spearman's ρ statistic²⁷

Employment.—Analyses here showed that such factors as length of employment history ($\rho = .26, P = .10$), age ($\rho = -.31, P = .064$), and health at T_1 ($\rho = .48, P = .008$) were all related to women's being employed at T_4 . It was not unexpected that younger women, women who had more years of employed work in the last ten years, and women who were healthier were more likely to be employed post-AFDC. But surprisingly, neither years of welfare reciprocity nor years of education seemed to have any bearing on final employment status. Psychological well-being appeared to have a relatively minor connection to final employment: the three significant relationships found suggested that unemployed women tended to endorse more symptoms overall and to report more anxiety and somatization symptoms than employed women. There was, however, a major tie between psychological well-being and employment that was reflected in the significant correlations between all eight well-being variables and years of employment. Women who had worked more years in the last ten years consistently endorsed fewer symptoms and felt better about themselves and their lives. Among the coping attribute variables, only the women's evaluation of their coping competence was related to being employed ($\rho = .30, P = .071$). Solution achievement at T_3 was the only transition-related coping variable associated with employment ($\rho = .28, P = .089$). And, of the social network variables, network size was associated with working at T_4 ($\rho = .52, P = .004$). Thus, women who were more positive about their competence to cope, who were more successful in achieving problem solutions at T_3 , and who had the largest social networks were those most likely to be working outside the home at T_4 .

Income.—Remarkably, very few variables related either to total or per capita income at T_4 . None of the personal characteristic or social network variables was associated with income; only two relationships were found between income variables and psychological well-being and coping: per capita 4 with quality of life ($\rho = .28, P = .090$) and income 4 with the BAPC ($\rho = .30, P = .084$). Only solution specificity, among the problems and plans variables, was significantly related to income ($\rho = .32, P = .064$). The implications here are that women with higher incomes also reported higher quality of life, more favorable

coping attitudes, and more specific plans about coping with AFDC termination. As suggested previously, it appears that regardless of age, health, welfare reciprocity, coping patterns, social networks, and psychological well-being, women were able to pull together some kind of marginal incomes for themselves.

Health—Exploration of variables associated with final health status suggested that factors covarying with good health were more years of education, less years on welfare, being employed at T_1 , and longer employment histories. Similarly, the general symptom index, number of symptoms endorsed, and levels of anxiety and somatization (as reflected by the BSI) were positively correlated with perceived health problems. Women's positive evaluation of coping competence was tied to better health, but no relationships were found between coping, as measured by transition problems and plans variables, and health, or between social network variables and health.

Psychological well-being.—Aside from the associations already discussed between factors of health, income, and employment and psychological well-being (most notably between years of working and well-being), numerous associations were uncovered between social network variables—particularly network size and perceived availability of emotional support and practical help—and well-being variables. Likewise, a large number of significant associations were located between transitional problems and plans variables and psychological well-being. Congruent with results of other studies documenting relationships between social factors and psychological health, our findings suggest that years of employment, higher incomes, social support, and conceiving and achieving specific steps to solve AFDC problems were connected to women's sense of psychological well-being post-AFDC.²⁸

Summary and Conclusions

Although few would argue that AFDC represents an adequate solution for poor women and their dependent children, there are about 3 million women and 7.7 million dependent children for whom AFDC represents at least part of their livelihood.²⁹ Among AFDC women in general, the women in our sample are part of a unique subgroup. They had been recipients for more years than is usual, they were older than the average AFDC woman at the time of termination, and their ineligibility for further benefits had nothing to do with having found paid work or other means of support. Beyond these unique characteristics that were central to the study, most women in the sample

were white and did not live in large, urban areas. It is assumed, therefore, that most of the problems faced by respondents were not compounded by racial discrimination and ghetto living conditions.

Although our data do not allow precise estimates of the extent of women's welfare dependency over the years, we know that there was a range of recurrency years: approximately one-third of the sample had received AFDC for four years or less, another one-third were recipients for five to fourteen years, and the remaining one-third had received benefits for sixteen to twenty years. During this time on welfare, women put together diverse and changing income packages that often contained sizable wage components. With the exception of one woman, respondents all had some type of employment during the last ten years; in fact, over one-third of the sample worked nine to ten years of the last ten years.¹⁰ Correlational findings lend support for speculating that some combination of health and mental health problems, lack of education, and deficient generalized coping attitudes are related to number of years of employment. These are among the issues that need to be specifically addressed in further study.

What happened to this special group of long-term recipients when their children passed the age of entitlement? We found that project women planned for and reacted to benefit loss in a variety of ways. On the positive side, women's average income was only about \$24.00 less at T_2 than it had been at T_1 . Moreover, they reported reliable social support networks, and, despite their failure to plan in detail about how they would take care of themselves post-AFDC, they maintained stalwart faith in their ability to get by. It is important, however, that maintenance or even increases in T_2 income is viewed in the context of the concomitant increases in the Consumer Price Index. From 1979 to 1980, consumer prices rose 13.5 percent, and from 1980 to 1981 they increased another 10.9 percent, causing a net decline in real median family income in both years.¹¹ It is also the case that the incomes of more than one-half of the women actually decreased from T_1 to T_2 . Although one might have expected a greater income decline, given that women's pretermination incomes were already minimal and given the presumption that some sort of societal or familial provision (however temporary, discontinuous, or inadequate) can be activated to prevent starvation, exposure, or serious neglect of health, one would not have expected complete absence of income sources.

With respect to final income status, ten women reported work as their major income source at T_2 , ten were primarily dependent on social insurance or public assistance, and another five were being supported by children or husbands. In two out of three of these latter cases, husbands' incomes also consisted of social insurance (V.A. or Social Security retirement benefits). Of all of the women in the sample, the four who had been found eligible for SSI and the three deriving

major support from social insurance transfers (their own or their husbands') may have the most secure incomes. Certainly, income from General Assistance and Unemployment Insurance can be viewed as temporary. And although employed women had the highest incomes at T_4 and seemed relatively better off in other respects (e.g., health and psychological well-being), because of their age and placement in the low-pay, low-benefits sector of the labor market, the continuing stability of this income source is also questionable.

If the women's average income and employment status changed only slightly as a result of AFDC termination, their reported health problems significantly increased over the almost two-year project period. From T_1 to T_4 , at least three women had been hospitalized for serious disorders, and most reported worsening of previously reported problems and the emergence of new ones. Although it seemed that being chronically ill and thus eligible for SSI was one of the more fruitful routes to financial security available to the respondents, it was never our impression that women were feigning illness. At this point, it is impossible to unravel the nature of the relationships between health problems and number of years on welfare and between health problems and number of years of paid employment. It may be that years of struggling to make ends meet had a deleterious effect on health or, conversely, that poor health was a major contributor to unemployability and thus welfare dependency. At any rate, we were struck by the marginal or ill-health of many of the respondents and by the difficulty they were having in paying for health care.³² Only six women received SSI or Medicaid benefits. Most women tried to manage without professional medical services. They put off doctors' appointments, self-medicated with over-the-counter drugs, and hoped for the best. Although the prospects of growing older are not typically seen as comforting, women's eligibility for SSI when they reach age sixty-five allows them to look to a time (about fifteen years hence) when they will have a more stable, albeit still marginal, income and at least some health-care coverage. It is their inability to buy medical care in the interim years that was most worrisome to them.

At the same time that one may be heartened by the overall resilience of the women in the study, the availability of some resources, and the ability of most women to connect to a means of livelihood (sick women found SSI, employed women continued to work; relatively healthy unemployable women relied on their families; and women without jobs, family resources, or ill-health were sustained by temporary General Assistance), none ended up in an enviable position. Some women fared better than others, but as a group, their incomes were marginal, their health was poor, and their sense of psychological well-being was significantly lower than the norm. This is not especially surprising since

the women's circumstances were similarly grim at the outset, and one would not have expected an improvement.

The continuity of relative scarcity in the lives of project women raises the issue of psychosocial costs of adapting to chronic economic scarcity. It is true that while most of us have experienced at least a temporary sense of scarcity or deprivation, "some people live their entire lives or long periods of their lives with a sense of economic scarcity because they are truly poor even by minimal standards in our society."⁴³ Study results suggest that the price exacted for years of belt tightening and suspension of personal goals is some, probably interactive, combination of elevated psychological symptoms and ill-health. It is notable that even though most women expressed worries about their ability to manage after AFDC, psychological indicators of well-being did not significantly change from pre- to posttermination. One can use Fried's analysis of endemic stress as a basis for speculation that women's plentiful experiences with other deprivations and demands over the course of their lives and their well-practiced responses of accommodating to such stresses promoted a perception that AFDC termination was just another small but inevitable incursion and allowed women to avoid more intense and debilitating psychological reactions.⁴⁴ Findings also suggest that extensive work histories and supportive social ties may have buffered the impact of endemic stress on women's lives. Clearly, those with higher incomes, more years of employment, and better health were in a better psychosocial position post-AFDC.

While much has been written about the demoralizing and stigmatizing effects of welfare reciprocity,⁴⁵ for women like those in the study, dependence on welfare seems to offer the best available alternative to their situation. The withdrawal of support from these women poses a set of new problems for them for which there are no assured solutions. From the information collected in this study, it is clear that the women involved did want to work, if physically able, and did view employment as the primary means of solving the approaching dilemma of the loss of AFDC. However, given the condition of the economy, the status of women in the labor market in general, and the limited employability of many of the respondents, specifically, the likelihood of employment providing a solution to the loss of AFDC was minimal. Ironically, at *T*₁, 68 percent of the project women were still living with and contributing to the support of their youngest child—still had a dependent child—even though he or she had passed the legal age of entitlement.

Because of sampling limitations, the conclusions drawn from the study are tentative and preliminary. However, they do help to delineate areas where further study might advance understanding about factors influencing post-AFDC status among long-term, older women recipients. For example, would pre- to posttermination income levels hold among

a more representative sample? Is absence of medical coverage in the years intervening between AFDC and SSI the most pressing problem for former recipients? How stable are incomes from various sources—work, family, General Assistance—over time? Have long-term recipients developed a kind of tolerance for life stress? If so, how can that stance be described and how is it related to post-AFDC adjustment? What are the interactive relationships among factors of work history, welfare history, income, and health? What are the differences in work skills, work history, education, coping style, and health between AFDC women who are terminated because of their child's age and those who terminate for other reasons? How long do women continue to provide for their eighteen-year-olds post-AFDC?

Much additional work needs to be done to address these issues, but results of this pilot effort alone serve to illuminate a gap in the present array of income-support programs. Perhaps the main conclusion to be drawn regarding social policy issues is the inadequacy of a welfare policy for women with dependent or recently independent children that is not sensitive to the difference in their life situations. While no longer eligible for AFDC because of the age of their child, most of our project women are also ineligible for SSI because of their own age and health status. When they are old enough, a few may receive small Social Security benefits, but this assistance will not be major because of their marginal attachment to the labor force.

Although current policy is concerned with whether AFDC recipients are employed or not, it makes little attempt to take into account the employability of the recipients or the deficiencies inherent in the structure of the current labor market, such as male-female wage differentials and the sex segregation of occupations. Consequently, expectations that AFDC women such as those in the present study can be self-sufficient as soon as their children reach eighteen, when they have not been able to do so previously, have little basis in reality. At the very least, reforms need to be made in current programs so that women's benefits can be continued until they are eligible for other income-support programs and/or they can be offered special assistance in planning for AFDC termination. But, more than this, careful and comprehensive examination of income-support policy needs to be undertaken to address the multiple problems that result from an irrational welfare system that simultaneously creates dependence on it and expects that long-term recipients will be able to successfully leave the system and become self-supporting.

Notes

1 Diana Pearce, "Women, Work, and Welfare: The Feminization of Poverty," in *Working Women and Families*, ed. K. W. Feinstein (Beverly Hills, Calif.: Sage Publications, 1979).

2 U.S. Bureau of the Census, "Families Maintained by Female Householders, 1970-79," *Current Population Reports*, Series P-23, 197 (Washington, D.C.: Government Printing Office, October 1980), p. 23.

3 U.S. Bureau of the Census, "Characteristics of the Population below the Poverty Level: 1980," *Current Population Reports*, Series P-60, 133 (Washington, D.C.: Government Printing Office, July 1982), p. 103, table 24, National Advisory Council on Economic Opportunity, *Critical Choices for the 80's* (Washington, D.C.: Government Printing Office, August, 1980), Katharine Bradbury, Sheldon Danziger, Eugene Smolensky, and Paul Smolensky, "Public Assistance, Female Headship, and Economic Well-Being," *Journal of Marriage and the Family* 41 (1979): 519-35, Heather Ross and Isabel Sawhill, *Time of Transition: The Growth of Families Headed by Women* (Washington, D.C.: Urban Institute, 1975).

4 Tish Sommers and Laurie Shields, "The Economics of Aging Homemakers," *Journal of Home Economics* 17 (1979): 16-23.

5 See Naomi Colan, *Passing through Transitions: A Guide for Practitioners* (New York: Free Press, 1981), D. B. Coates, S. Moyer, L. Kendall, and M. G. Howat, "Life-Event Changes and Mental Health," in *Stress and Anxiety*, ed. L. G. Sarason and C. D. Spielberger (Washington, D.C.: Hemisphere Publishing Corp., 1976), vol. 3, chap. 11, and L. I. Pearlin and M. A. Lieberman, "Social Sources of Emotional Distress," in *Research in Community and Mental Health*, ed. R. Simmons (Greenwich, Conn.: Jai Press, 1977).

6 State of Wisconsin, Department of Health and Social Services, "Statistical Supplement to the 1978 Welfare Reform Study," mimeographed (Madison: State of Wisconsin, February 1979), p. 9.

7 The thirteen-year-old child was living with his father and was not considered his mother's dependent.

8 State of Wisconsin, Department of Health and Social Services, "Cost Effective Report for the Calendar Year 1979," mimeographed (Madison: State of Wisconsin, August 1980).

9 State of Wisconsin, Department of Health and Social Services, "Statistical Supplement to the 1978 Welfare Reform Study," p. 8.

10 State of Wisconsin, Department of Health and Social Services, "AFDC Employment Statistics," mimeographed (Madison: State of Wisconsin, November 1981), table 3.

11 During this same time, three employed and three unemployed women dropped out of the study.

12 U.S. Bureau of the Census, "Money Income of Households, Families, and Persons in the U.S.: 1980," *Current Population Reports*, Series P-60, 132 (Washington, D.C.: Government Printing Office, June 1982), p. 40, table 14. Some of the families in the "all family" category had two wage earners.

13. *Ibid.*, p. 83, table 2b.

14 Vivian Parker Makosky, "Sources of Stress: Events or Conditions," in *Lives in Stress: Women and Depression*, ed. Deborah Belle (Beverly Hills, Calif.: Sage Publications, 1982), pp. 35-53.

15 Leonard R. Derogatis, "SCL-90, Revised Version, Manual I" (Baltimore: Clinical Psychometrics Research Unit, Johns Hopkins School of Medicine, 1977). Scores on the BSI show close correspondence to those from the ninety-item full form ($r = .92-.99$). The "ninety" self has relatively high levels of internal consistency (coefficient $\alpha = .77-.90$) and test-retest reliability ($r = .78-.90$). Concurrent validity of the "ninety" with various MMPI scales and the Middlesex Hospital Questionnaire is reflected by correlations ranging from .52 to .75 and .36 to .92, respectively.

16 *Ibid.*, pp. 29-31.

17 Morris Rosenberg, *Society and the Adolescent Self-Image* (Princeton, N.J.: Princeton University Press, 1965). According to Tippet and Silver, reliability of the scale is reported as .85 and convergent validity scores range from .56 to .83 (Jean Tippet and F. Silber, "Self-Image Stability: The Problem of Validation," *Psychology Reports* 17 [1965]: 323-29).

18 Angus Campbell, Philip E. Converse, and Willard I. Rodgers, *The Quality of American Life* (Ann Arbor: Institute for Social Research, University of Michigan, 1971), p. 367.

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20 Women's coping attributes, strategies, and resources are discussed in more detail in Sharon B. Berlin, "AFDC Women in Transition," mimeographed (Madison: report prepared for the State of Wisconsin Division of Economic Assistance, School of Social Work, University of Wisconsin—Madison, 1982), pp. 10–13, 42–58.

21 Forrest B. Tyler, "Individual Psychosocial Competence: A Personality Configuration," *Educational and Psychological Measurement* 13 (1978): 309–23.

22 Jerome J. Platt and George Spivack, "The MEPS Procedure," mimeographed manual (Philadelphia: Hahnemann Medical College and Hospital, 1975).

23 Stephanie Beukema, Diana Dill, Ellen Feld, and Jacqueline Martin, "Coping with Stress," in *Lives in Stress: A Context for Depression*, ed. Deborah Belle (Cambridge, Mass.: Revised and Expanded Report, Stress and Family Project, Harvard School of Education, Harvard University, 1980), pp. 173–229.

24 Average unemployment rates for women who maintained families rose from 9.2 percent to 12.4 percent over the project period, 1980–82. Similarly, unemployment for Wisconsin residents increased from 7.9 percent to 9.2 percent during this same time. See U.S. Department of Labor, Bureau of Labor Statistics, *The Monthly Labor Review* 106 (Washington, D.C.: Government Printing Office, January 1983): 74, and *Employment and Earnings* 29 (Washington, D.C.: Government Printing Office, July 1982): 133. Wisconsin Legislative Reference Bureau, *State of Wisconsin Blue Book, 1981–1982* (Madison, Wis.: Department of Administration, Document Sales and Distribution, 1982), p. 673.

25 Platt and Spivack, pp. 43–48.

26 Judith Wubel, Patricia Benner, and Richard Lazarus, "Social Competency from the Perspective of Stress and Coping," In *Social Competence*, ed. Jeri Dawn Wine and Matt Dianne Smye (New York: Guilford Press, 1981), p. 87.

27 Because the study focused on identifying potential relationships between variables for further study, associations that are significant at $P \leq .10$ are reported here.

28 See Deborah Belle, ed., *Lives in Stress: Women and Depression* (Beverly Hills, Calif.: Sage Publications, 1982); H. Brenner, *Mental Illness and the Economy* (Cambridge, Mass.: Harvard University Press, 1973); George W. Brown and Tami Harris, *Social Origins of Depression: A Study of Psychiatric Disorder in Women* (New York: Free Press, 1978).

29 U.S. Department of Health and Human Services, Social Security Administration, Office of Research and Statistics, *Social Security Bulletin* 45 (Washington, D.C.: Government Printing Office, October 1982): 56.

30 See also Philip A. Aufderheide, "The Mix of Work and Welfare among Long-Term AFDC Recipients," *Social Service Review* 53 (December 1979): 586–605.

31 U.S. Bureau of the Census, "Money Income of Households, Families, and Persons in the U.S.: 1981," *Current Population Reports*, Series P-60, 134 (Washington, D.C.: Government Printing Office, October 1983), p. 1.

32 See Cole and Lejeune for hypotheses about the high frequency of health problems among welfare recipients (Stephen Cole and Robert Lejeune, "Illness and Legitimation of Failure," *American Sociological Review* 37 [1972]: 347–56).

33 Marc Fried, "Endemic Stress: The Psychology of Resignation and the Politics of Scarcity," *American Journal of Orthopsychiatry* 52 (January 1982): 8.

34 Ibid., pp. 4–19.

35 Lee Rainwater, "Stigma in Income-tested Programs," in *Income-tested Transfer Programs: The Case For and Against*, ed. Irwin Gaskin (New York: Academic Press, 1982); Scott Brun, "Welfare from Below: Recipients' View of the Public Welfare System," *California Law Review* 51 (1966): 370–85; John B. Williamson, "Beliefs about the Motivations of the Poor and Attitudes toward Poverty Policy," *Social Problems* 21 (1974): 634–48.

Social Workers and Old Age Pensions

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The opposition of Massachusetts social workers to state relief for the elderly revealed their conservative traditions. Such opposition sprang from the nineteenth-century origins of social casework, which presumed individual responsibility for poverty. In addition, the twentieth-century campaign for professional status hardened opposition to reform since state old age "pensions" implied a right to relief without determination of need by a trained worker.

Social work has a long and conservative history. Contrary to convention, it did not emerge in the twentieth century as a product of Progressive reform. The vitality of the conservative tradition in social work is aptly demonstrated in the response of Massachusetts social workers to the popular demand for old age pensions (state relief) for the elderly in the 1920s. The leadership and rank and file of social welfare agencies condemned such relief as a pernicious and "unthinking dole." In the very language of their denunciation, these social workers revealed their debt to their nineteenth-century predecessors. Resistance to old age pensions had two sources. First, social workers believed that such relief demoralized the working poor; second, the twentieth-century campaign to make social work a profession was threatened by state programs. Each of these sources of opposition is tied to casework, the central technique in social work, itself a product of the nineteenth century.

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The Old Age Pension Movement in Massachusetts

Interest in old age pension legislation in Massachusetts first surfaced in the 1890s, provoked by intense debate over social insurance in Europe. This period coincides with the aging of the first immigrant cohorts from Ireland (16 percent of the Irish population of the state was sixty and over in 1895, and they constituted 20 percent of the state's population in that age group) and the decline of the coverage of the Civil War pension system. Over the next thirty years there was a perennial demand for special state assistance for the aged; the vitality of the movement is probably more closely related to the aging of immigrant cohorts than to the slow increase in the proportion of the elderly in the population. The aging of unskilled industrial workers placed great pressure on their adult children, this pressure expressed itself in political agitation. Although most scholars emphasize the role of middle-class reformers, the strength of the demand for pension lay almost entirely in the urban working class, it is simply a myth that the working class and its organizations opposed state welfare programs.¹

Popular support for old age pensions became very powerful in the 1920s and was articulated through labor organization lobbies, the Fraternal Order of Eagles, the state Democratic Party, city politicians and constituency demands on state representatives. In 1930, fearing defeat at the polls, the Republican leadership in the legislature approved an old age assistance measure. Although a victory of sorts for the pension movement, the act was really only a mild liberalization of customary relief practice; it satisfied the restrictive demands for investigation and "social service" voiced by public and private social workers.²

These social workers had been steadfastly opposed to the idea of a state pension for the elderly. They recognized full well that the essence of the pension movement was that pensions were a "right," to be given to the veteran of industry by a grateful state, just as military pensions were awarded to veterans of war. For this reason, pension movement leaders were openly hostile to "social service," since it constituted a demeaning link to poor relief. Pension bills often proposed an administration separate from that of public welfare and provided liberal income, real estate, and family responsibility provisions.³ The assumption of a right to a pension shocked social workers, for it placed upon society the blame for penurious old age, precluded the investigation of the individual's moral qualifications for assistance, and thus threatened both the time-honored principles of welfare and the employment of the professional social worker.

Social Workers and the Pension Movement

A review of the proceedings of national conferences and of the major journals in social work in the early twentieth century suggests the unfriendliness with which social workers greeted proposals for social insurance schemes for health, dependent children, or the elderly. Indifference or hostility characterized most national and local publications, excepting *Survey*, *Social Service Review*, and the *Catholic Charities Review*, which showed varying degrees of sympathy.⁴ In Massachusetts, as in most other states, the social work leadership opposed the mothers' pension legislation promoted in 1912–13. In a strategy instructive of their future response to old age pensions, prominent Boston social workers were able to rewrite the mothers' aid law, eliminating the suggestion that such assistance was a "right," and requiring provisions for the investigatory and guidance procedures of "social service."⁵ However reluctant they may have been to accept an expanded state role in welfare, social workers recognized the inevitability of the legislation and reworked it into acceptable form.

The old age pension movement was to provoke the same stiff resistance among social welfare professionals. Debate over these pensions reached new heights in the mid-twenties, when a state commission reported in favor of an old age assistance measure, which, while neither generous nor unrestricted, would have provided a new source of funds for poor old people.⁶ Almost without exception the most influential social workers in the state condemned this measure. The opposition included the two most prominent social workers with the aged in the state, Christine McLeod and Francis Bardwell, the leadership and staff of Boston's social welfare agencies, and the commissioner of the Massachusetts Department of Public Welfare (DPW), Richard Conant.

Conant owed his appointment by Governor Calvin Coolidge to the influence of executives of private social welfare agencies; his long administration of public welfare reflected their conservatism. The DPW consistently resisted the movement for old age pensions during the twenties.⁷ In 1925, Conant and other leading social workers were invited to attach comments to Lucille Eaves's *Aged Clients of Boston's Social Agencies*, a research piece on Boston's poor elderly. Most took the invitation as an opportunity to attack the pension idea. In six of seven comments, pensions were criticized as, at best, inadequate to the needs of the dependent aged, who could only be served properly by expert social work. These reactions came in the face of the conclusion reached in the Eaves study that "the risks of being left without means of meeting the economic helplessness or expensive illnesses of old age are not confined to the workers with low earning capacity but are shared by persons in all ranks of society."⁸

Given this conclusion, the most surprising remarks were those of Robert W. Kelso, executive secretary of the Boston Council of Social Agencies, former commissioner of the Massachusetts DPW, and a nationally known scholar of social welfare. In the midst of his own description of the financial straits of the aged, Kelso insisted that "doles may fill the stomach . . . but they can do little to dispel that loneliness of heart which is the worst to bear."⁹ What the aged needed "above all other things" was the "sympathetic personal help such as the social case worker can give."¹⁰ Stockton Raymond, general secretary of the Family Welfare Society of Boston (the most powerful private agency in the Boston welfare system), echoed Kelso's remarks and objected to any "fixed sum" as inappropriate for individuals. According to Raymond, what was required was an "elastic scheme of public assistance which would meet individual needs but thwart dependency on public funds."¹¹ William H. Pear, patriarchal general agent of the Boston Provident Association, thought this too much: in his opinion, only a liberalization of current assistance practice was needed. William L. Hardy, former secretary of the Overseers of Public Welfare in Boston, agreed that only slight changes in the present administration of public relief were necessary; and Maurice B. Hexter, executive director of the Federated Jewish Charities of Boston, doubted that a pension system was either necessary or wise.¹²

These were hardly disinterested opinions. Running through each was a defense of the role of the social worker in modern society. Commissioner Conant expressed the threatened self-concept aptly in his comment, which fulsomely praised Boston's social agencies and homes for the aged. Conant believed that "the most hopeful progress now being made toward [poverty's] solution in Massachusetts is in the development of social case work."¹³ It was the "unthinking dole" which had a "weakening and pauperizing effect."¹⁴ The careful services of a social worker were necessary to guard society against abuses and to protect the individual from his own avarice and laziness.

These comments reaffirmed the clear opposition that the most prominent social welfare leaders maintained against any of the pension schemes of the 1920s. This opposition was especially crucial in the Family Welfare Society and the Boston Provident Association because they exercised a powerful influence over the journals and schools of social work in the state and because they were principal employers and referral agencies for social workers. As the major coordinating body for social service in the city, the Boston Council of Social Agencies also directly influenced social workers. When this body convened more than forty Massachusetts social workers to consider the question of old age pensions, these professionals reported themselves unanimously opposed because of "dangers to independence and self-support."¹⁵ What was needed was "intelligent institutional and outside care rather than

an unthinking dole."¹⁶ The council itself rejected "unthinking charity doles" because they simply made the poor poorer; "case work service," "systematic social service," was the solution to the problems of the aged.¹⁷

By the late twenties, a few social workers came to support some kind of state assistance for the aged. Most important among these were members of the iconoclastic Women's Educational and Industrial Union, including Lucille Eaves, who reversed her opposition of 1925.¹⁸ But in the main the only "social workers" who consistently supported old age pensions were those connected to the Catholic Charitable Bureau. The Charitable Bureau's constituency was in the Irish and Italian working classes, and it was much less antagonistic than secular agencies to urban relief systems that its constituents were beginning to control. In addition, the Catholic agency, speaking for the acerbic Cardinal O'Connell, was profoundly suspicious of private "social service," which was viewed as a Protestant device, as free thinking and intrusive, and as fundamentally uncharitable. In its strong support for state pension legislation, the Catholic Charitable Bureau followed the outlines of national Catholic policy, which saw support of the aged as "the duty of the state."¹⁹

The Sources of Opposition to Pensions

In reviewing social workers' opposition to old age pensions, two sources stand out. The first is a very traditional fear of the effects of the dole on the character of the poor. The second is the belief among social workers that public categorical relief threatened the emerging profession of social work. Each of these two sources is linked to the casework technique

Character and Personality

The historical view that holds that social work was born in the early twentieth century emphasizes the replacement of upper-class volunteers with paid social workers from the middle classes, the new workers' eschewal of moralism, and the proliferation of schools, organizations, and journals that mark the pursuit of professional status. This history also sets the origins of the vocation in the Progresssive reform era; most American social work literature treats reform as a natural dimension of the discipline. Some historians have encouraged this view, and by focusing on settlement house workers and other figures marginal to the field, found reform to be an inherent feature of social work practice.²⁰

The separation of twentieth-century social workers from nineteenth-century charity organization agents implies a progressive step in history, away from a moralistic past toward a scientific and still amelioristic future. But does a discontinuous view of the history of social work inform us well about its content and function?

No one familiar with nineteenth-century discussions of poor relief can mistake the strikingly archaic language of the Massachusetts social workers when they voiced their opposition to pensions. The style of professionalization fell away and in its place rose once more the ogre of pauperization, the threat of "promiscuous charity" that so disturbed the dreams of the welfare thinkers of nineteenth-century bourgeois societies. In this persistent rhetoric we can trace the great continuity in social welfare practice. When Lawson Purdy stated in 1925 that material relief would sap "strength of character and prepare" recipients "for a life of dependency," he was invoking the memory of his ancestors, who sincerely believed that a cord of free wood could corrupt the best of Brahmin families.²¹ When Commissioner Conant argued that pensions were seen by potential beneficiaries as a "fine chance to get something for nothing or as their due from society," he commemorated the thinking of Thomas Malthus, Alexis de Tocqueville, and Conant's antebellum Boston predecessors, Josiah Quincy, Joseph Tuckerman, and Moses Grant.²²

The conventional belief that social work is the child of twentieth-century reform movements results from the failure of historians to emphasize the continuity of theory and practice among "helpers" in all bourgeois societies. This continuity stretches from the relief systems devised by urban bourgeoisie in early modern Europe, who sought to control the labor market by controlling the distribution of relief, to Franklin Delano Roosevelt and Harry Hopkins, who sought precisely the same end.²³ First and foremost in these efforts was the desire to enforce bourgeois work norms upon the working classes. As the city of Boston took shape in the antebellum decades, Josiah Quincy, Joseph Tuckerman, and Moses Grant devised a welfare system with precisely this goal. These men were not philanthropic dilettantes but members of an elite deeply interested in the social structure of an expanding city, their interest focused particularly on control of the working classes in that city and the cultivation of work discipline. Grant's Society for the Prevention of Pauperism (SPP) had, as its principal aim, the discouragement of almsgiving. Indiscriminate charity was a pernicious practice that encouraged sloth, indolence, and dependency, depriving men of the proper incentive to work (at the prevailing wage). The SPP set down quite clearly the three axioms of welfare still found in the twentieth century: the suppression of relief because of its traumatic effects on the character of the poor, the organization of charities to prevent fraud, and the investigation of each applicant by charity workers

who provided censure, advice, and intervention as needed (i.e., casework).²⁴ After the Civil War, urban Charity Organization Societies use these same principles with still greater effect in guiding public and private welfare,²⁵ and they remained the standards carried by social workers in their campaign against pensions in the 1920s.

At the heart of this great tradition's fear of relief is an intense individualism. The bourgeoisie attacked charity and state relief because without a transformation of the inner self (into the model of self-reliance), the poor were only corrupted by alms. The fixation on the internal "springs of action" created the compulsive behavioralism of social work, the incessant drive to impose middle-class norms upon the poor, and the resistance to examination of the society around the individual. Such individualism could not help but lead to the technique that became known as casework. The fundamentals of this technique did not wait publication of Mary Richmond's *Social Diagnosis*; they were established in Quincy's Boston by the 1820s and fully developed by Tuckerman in the 1830s.

In the twentieth century the "moral character" of the poor became the "adjusted personality" of the dependent. Mary Richmond stands out as the dominant figure in the movement of social work practice toward a modern conception of the inner self, inasmuch as psychology and psychiatry entered common casework practice before 1930, moved through Richmond's vague use of personality.²⁶ But such casework retained its hoary, investigatory, interfering tradition. Christin McLeod, a nationally known figure for her social work with the aged at the Boston Home for Aged Men, was a prominent opponent of old age pensions. Her social work practice provides an excellent illustration of the continuity of welfare. While her casework records are filled with the jargon of Richmond's social diagnosis, McLeod's practice was to investigate the applicant for moral turpitude, enforce family responsibility, and maintain constant surveillance for fraud. Indeed, McLeod's employment at the home was a product of that institution's nineteenth-century welfare heritage; it had been founded by Moses Grant and baptized in his theories of welfare practice. The home's by-laws reflected what Grant tried to teach all charity workers in nineteenth-century Boston. The officers of the home informed the public in 1865 that their charity offered "no bounty upon improvidence or vice. . . . careful inquiry [is made] into every case. These thorough investigations are not always pleasant."²⁷ In 1920-21, the directors of the home hired McLeod as a professional social worker whose skills were in concert with this tradition of welfare practice.²⁸

Only sophistication separates Grant's casework methods from those "invented" by scientific charity in the late nineteenth century and "professionalized" by Richmond and other social workers in the early twentieth. Each charity epoch was characterized by niggardliness toward

the poor and the control of welfare activity to ensure the improvement, diligent labor, and thrift of the needy. Despite this, among some historians that the psychological trend in social work represented a radical break with a moralistic past, the twentieth-century emphasis upon personality is both traditional and conservative response to social reform. It is difficult to discern any correspondence between the twentieth-century paradigm of psychology and the nineteenth-century absorption in the character of the client. A psychiatric social worker remarked in a historical review of casework published in 1949, "Even casual attention to the record of casework's pioneer days reveals that the attempt to modify the personality is not a recent and revolutionary undertaking of case workers but an evolutionary development of aims present from the beginning."⁹

In their fear of the dole and in their investigatory and supervisory casework, social workers dutifully repeated the work of their predecessors. And, in their resistance to social reform, the "modern" workers betrayed this same debt to the past. Whether character or personality was the focus, the result was a strong antireformist presumption that the individual was poorly adjusted to the society. Despite Richmond's occasionally sanguine comment on the peaceful coexistence between social reform and casework,¹⁰ the two approaches were really contradictory: one perceived society as sick, the other diagnosed the client as sick.

The Professionalization of Social Work

Rather than reduce resistance to reform, the "professionalization" of social work in the twentieth century hardened opposition to old age pension proposals. Categorical public assistance threatened the legitimacy of the discipline's chief claim to professional status: casework method.¹¹ It was for this reason that Mary Richmond opposed categorical relief as represented by old age pensions; these were individualistic, whereas differential casework treated "unequal people unequally."¹² The editors of *Family*, the journal of the most prominent social work agencies, stated that the problems of old age could not be resolved by income because there was a "need for imagination, insight, and that case work skill which sees through a common hand to the essential differences in human beings."¹³

Christine McLeod's casework again illustrates these principles and the obstacles they placed in the way of an open consideration of old age. McLeod was fully aware of the economic difficulties of the elderly in any industrial society; the causes of old age dependency were "outside the control" of the individual. But she did not follow the logic out and embrace a social solution. She insisted that the elderly were not a group, but "individuals" whose needs required "individual consideration and treatment." Her files are filled with the family histories, "adjustments made," and advice, counsel, and "plans"

only an expert social worker could provide. McLeod's sense of her clients' incompetence and of her own indispensability is seen in her report that she personally handled the funds for fifty out of sixty of the home's beneficiaries.³⁴ Such constituted the thinking dole. As late as 1930, social workers were arguing that the "real . . . need" among the aged poor was "for a case-work job" and "the skilled supervision of trained workers to protect and guide them."³⁵ The height of social workers' vision of their role and the threat posed to it by pensions is expressed in the Boston Council of Social Agencies conferees' objection that old age pensions would go to "persons who in the main have not the competence to keep what is given them or to use it for their support."³⁶

The promotion of "social service" as the solution to the problems of old age was patently self-protective. If pensions were a "tight," there was no need for a social worker to determine right and then supervise the spending of the money. Always suspicious of the quality of public welfare, social workers saw categorical assistance—which implied statutory, "mass methods" bereft of the discriminating skill of casework—as a threat to their professional status, a status precariously perched on that unsure skill. When they perceived that resistance to popular legislation was useless, social workers sought to rewrite the bills so that there was a strong social service component. A thread of anxiety runs through their protests against mass programs; social workers were well aware that the proponents of pensions were deeply hostile to the interventions of social work. A socialist advocate of pensions charged that "these social workers are frauds—they talk big but really at heart don't want any legislation passed and enforced which will in time abolish the necessity for their kind of work."³⁷

A deep conservative tradition, embedded in the assumptions about the individual implicit in the casework technique, prepared social workers to oppose sincerely all unsupervised relief. And their fragile professional status ensured a defensive reaction to social reforms that undermined the *raison d'être* of the vocation. These two sources of opposition to old age pensions resulted in a curious irony. In the late 1930s, after nearly a decade of depression and after a revolution in welfare for the elderly, Christine McLeod still clung to the belief that social service was the first need of the elderly. Looking over a world of welfare now transformed, she could not refrain from bitterly reproaching the pension advocates for creating among the aged "a desire to live independently."³⁸ Under any other circumstances McLeod would surely have insisted that this was what she, and social work, had always intended.

Notes

The reader must bear in mind that the persons referred to here as social workers were then known as charity workers or social caseworkers. They had their philosophic

roots in the early and middle nineteenth century. Another branch of social work, time of the agitation for old age pensions was comprised of the settlement house le and workers, many of whom favored general social reform.

1 For the first signs of interest, see [Edward Everett Hale], "Universal Life Endowment Lend a Hand" 5 (August 1890): 521-26; Ernest C. Marshall, "Annual Report of Institutions of Boston," in *Documents of the City of Boston (DCB)* (Boston, 1897), v, no. 14, pp. 6-7, and "Annual Report of the Institutions Registration Department," (Boston, 1899), vol. 1, no. 17, pp. 1-7. The hypotheses concerning the effects of among ethnic populations are more fully presented in Brian Gratton, "Boston's El (1890-1950: Work, Family, and Dependency)" (Ph.D. diss., Boston University, 1973), chap. 2. For the decline of the Civil War system's coverage, see *ibid.*, chap. 7. A recent scholar, Hacer Tishler first noted this important change in *Social Security and Reliance, 1890-1917* (Port Washington, N.Y.: Kennikat Press, 1969), p. 89. The sta for the Irish population can be found in Massachusetts Bureau of Statistics of 1 *Census of the Commonwealth of Massachusetts, 1895, vol. 2, Population and Social Sta* (Boston, 1895), pp. 704-7. The *Proceedings of the annual conventions of the Massach state branch of the American Federation of Labor (1915-30)* reveal the strong su given old age pensions by trade unions in the state; see also the Massachusetts Commu on Pensions, *Public Hearings, 1923-1924*, Massachusetts State Library, Boston. Gary M. Fink's *Labor's Search for Political Order* (Columbia: University of Missouri, 1973) is one of several recent works showing that organized labor was not oppos state welfare programs. Yet historians continue to repeat this tale, verse and ch (see James Leiby, "Social Work: History of Basic Ideas," *Social Work and Social Ref Encyclopedia of Social Work* [Washington, D.C.: National Association of Social Wo 1977], p. 1522).

2 The best treatment of the legislative aspects of the old age pension movem Alton A. Linford, *Old Age Assistance in Massachusetts* (Chicago: University of Ch Press, 1919), pp. 5-87, see also *Boston Herald* (March 21, 1930), and May 13, 1 and Alexander Lincoln to Mr. (Eben W.) Bumsted, May 29, 1930, in papers of Sentinels of the Republic, Box 2, Folder 11, Old Age Assistance Bills, 1930-31, Schles Archives, Cambridge, Mass. Support among social workers once opposed to ol assistance can be found in Boston Council of Social Agencies (BCSA), *Bulletin*, (July 1930), in which commentators emphasized that the bill was not a "pension provided "social service for the aged."

3 Abraham Epstein, *Facing Old Age* (New York: Alfred A. Knopf, Inc., 1922 213-13).

4 The following conference reports and journals were reviewed: American Assoc for Organizing Family Social Work, *Bulletin*, 1924-30; Family Welfare Associati America, *Newsletter (Highlights)*, 1926-30; (*Journal of*) *Social Forces*, 1922-31; *Co (Social Work Journal)*, 1920-30; *Survey*, 1920-30; *Social Service Review*, 1927-31; *J (Journal of Social Casework)*, 1920-30; *Catholic Charities Review*, 1923-25; *procee of National Conference of Charities and Correction (NCCC)*, 1900-1916; *National Conf of Social Work (NCSW)*, 1917-30; Simmons College Alumni, *Social Worker*, 192-BCSA, *Annual Reports and Bulletin*, 1922-30; Family Welfare Society of Boston, *A Reports*, 1920-31.

5 Mark H. Left argues that most Charity Organization Societies opposed mo pensions ("Consensus for Reform: The Mothers' Pension Movement in the Progr Era," *Social Service Review* 47 [September 1973]: 397-417). William H. Pear rec the success of Boston social workers in rewriting the mothers' pension bill, with "ex requirements of case work standards" and assurance that it was a "relief measure not a right" ("How Boston Meets and Supports Its Family Service Program," in *Procee of the National Conference of Social Work* [Chicago: University of Chicago Press, 1 pp. 489-90], also see Robert W. Kelso's remembrance of Alice Higgins Lathrop' in this legislative victory (see "Promoter of Social Legislation," *Family I* [December 1 11-12]).

6 Massachusetts Commission on Pensions, *Report on Old-Age Pensions* (Boston: omwealth of Massachusetts, 1925), pp. 18-21.

7 William H. Pear, "The Life Story of the Monday Lunch Club" (n.p., n.d.), in *Comr on Memorials*, Massachusetts Conference of Social Work, 1963; Richard K. Co papers; Richard K. Conant (Jr.), Milton, Mass. Also see Boston Provident Associ

Minutes of Meeting of Board of Managers, meeting of February 10, 1920, Family Service Association Archives, Boston, Mass., Richard K. Conant, *Establishing a Professional Group* (Boston: Eastern Massachusetts Chapter, National Association of Social Workers, 1959), p. 18, Gratton (n. 1 above), pp. 355–57. Also see Linford (n. 2 above), pp. 125–27.

8 Lucile Eaves, "Director's Preface," in *Aged Clients of Boston's Social Agencies* (Boston: Women's Educational and Industrial Union, 1925), p. 3.

9 Eaves, *Aged Clients*, p. 125.

10 Ibid.

11 Ibid., p. 128.

12 Ibid., pp. 130–33, 138–40.

13 Ibid., p. 135.

14 Ibid.

15 Boston Council of Social Agencies (BCSA), *Bulletin*, no. 5 (January 1926), p. 8.

16 Ibid.

17 BCSA, *Bulletin*, no. 7 (November 22), p. 1.

18 See the members of the "Massachusetts Committee for Old Age Security," in Women's Educational and Industrial Union papers, Folder 53, Schlesinger Archives, Cambridge, Mass.

19 See Father George P. O'Connor, director of Catholic Charities, Archdiocese of Boston, in Massachusetts Commission on Pensions, Public Hearing, Boston, November 8, 1923, pt. 2, at the Massachusetts State Library, Michael Scanlon, "Catholic Charitable Bureau, Report of Boston—September 16, 1911," Folder: Diocesan Bureau of Charitable Bureau (*sic*), pp. 2–6, Scanlon to Cardinal O'Connell, November 22, 1916, Folder: Diocese of Beaumont, Texas, all in Chancery Archives, Archdiocese of Boston, Brighton, Mass. For the national Catholic position, see the journal of Catholic charity work, the *Catholic Charities Review*. The quotation can be found in John O'Grady, "Peniless Old Age," *Catholic Charities Review* 7 (March 1923): 85. See also 9 (April 1925): 151–52.

20 The classic historical work in the reform school is Clarke A. Chambers's *Seedtime of Reform: American Social Service and Social Action, 1918–1933* (Ann Arbor: University of Michigan Press, 1967), pp. 88–106, 160, 164, but cf. p. 165, n. 28 on p. 285. Chambers is joined by Allen F. Davis (*Spearheads for Reform* [New York: Oxford University Press, 1967]) and Robert H. Bremner (*From the Depths* [New York: New York University Press, 1956]), pp. 201–3), among others, in this view. Despite criticism, this interpretation of social work has penetrated historical consciousness, as can be seen in Daniel J. Rodgers, *The Work Ethic in Industrial America, 1850–1920* (Chicago: University of Chicago Press, 1978), pp. 221–26. The most significant impact of what one might call the charitable school has been that its interpretation is the one being accepted in reference works for social workers. James Leiby, a historian and professor of social welfare, writes from the perspective of this school (Leiby [n. 1 above], pp. 1521–23). Social work literature generally begins with the assumption that "social work, in principle and in tenet (*sic*), is not separable from social reform" (Donald S. Howard, "Social Work and Social Reform," in *New Directions in Social Work*, ed. Cora Kasius [New York: Harper & Bros., 1954], p. 159). A recent, theoretical treatment of American social work shows the vitality of this reform tradition: Nina Foren, *Social Work: The Case of a Semi-Profession* (Beverly Hills, Calif.: Sage Publications, 1972), pp. 15–23. An analysis critical of the potential for reform makes the same historical assumption: Reuben Bikusky, "The Influence of Political Power in Determining the Theoretical Development of Social Work," *Journal of Social Policy* 2, no. 2 (1973): 119–30. Harold Wilensky's influential books reflect the same convention, e.g., *The Welfare State and Equality* (Berkeley: University of California Press, 1975), pp. xvi, 119.

21 Lawson Purdy, in *Proceedings of the National Conference of Social Work* (Chicago: University of Chicago Press, 1925), pp. 184–85, the perils of the careless cord are recorded in Marvin E. Gettleman, "Charity and Social Classes in the United States, 1874–1900," *American Journal of Economics and Sociology* 22 (April 1963): 313–29, quote on 322.

22 Richard K. Conant, "Report of the Commissioner of the Public Welfare," Commonwealth of Massachusetts, *Annual Report of the DPW* (1924), p. 3. Thomas Malthus, *An Essay on the Principal of Population* (1798) (Homewood, Ill.: Richard D. Irwin, 1963), Alexis de Tocqueville, *Memoir on Pauperism* (1835), in *Tocqueville and Beaumont on Social Problems*, ed. Seymour Drescher (New York: Harper & Row, 1968). The leaders of

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Boston's antebellum welfare system are discussed in Gratton (n. 1 above), chap. 6, and in "The Boston Almshouse and Antebellum Welfare Theory" (paper read at the New England Historical Association Meeting, Sturbridge Village, Mass. 1980).

23 For early modern Europe, see Reinhold August Dorwart, *The Prussian State before 1740* (Cambridge, Mass.: Harvard University Press, 1971), chap. 1; C. F. Eatchilds, *Poverty and Charity in Aix-en-Provence, 1640-1789* (Baltimore: Johns University Press, 1976); Natalie Zemon Davis, "Poor Relief, Humanism, and The Case of Lyon," *Studies in Medieval and Renaissance History* 5 (1968): 215-75; same principles in the New Deal, see William W. Bremer, "Along the 'America: The New Deal's Work Relief Programs for the Unemployed,'" *Journal of American Studies* 62 (December 1975): 636-52.

24 Gratton (n. 1 above), pp. 179-81 and notes, and "Boston Almshouse: similarity between early nineteenth-century methods of investigation and twentieth-century casework is noted by Jacques Donzelot, *The Policing of Families* (New Pantheon Books, 1979), pp. 68-69, but see pp. 120-21 as well, and Raymond J. "Humanitarians in the Preindustrial City: The New York Society for the Prevention of Pauperism, 1817-1823," *Journal of American History* 57 (December 1970): 576.

25 Mania Klemburdt Baghdadi, "Protestants, Poverty and Urban Growth: A Study of the Organization of Charity in Boston and New York, 1820-1965" (Ph.D. diss., University, 1975); for England, Judith Fido, "The Charity Organization Society and Social Casework in London 1869-1900," in *Social Control in Nineteenth Century England*, ed. A. P. Donajewski (Totowa, N.J.: Croom Helm, 1977).

26 The influence of psychological models on social work (Roy Lubove, *The Professionalization of Social Work as a Career, 1880-1930* [New York: Athlone Press, 1975], chaps. 3 and 4, esp. pp. 86, 107-8, and 117; Blanche Coll, *Perspectives on Welfare* [Washington, D.C.: Department of Health, Education, and Welfare, 1985: 86]) has certainly been exaggerated, and such models do not explain social opposition to reform. In national social work literature and in casework practice with adult and aged clients by Boston social workers before 1930, little evidence of use of psychiatric techniques can be found, on the other hand, Richmond's influence is present everywhere. Colin Pritchard and Richard Taylor correctly identify Richmond's significance in what they call the "psycho-pathological" approach, because they note the identity of all social work that finds causal factors within the individual (*Social Reform or Revolution?* [London: Routledge & Kegan Paul, 1978], p. 2).

27 Home for Aged Men, *11th Annual Report* (Boston, 1865), pp. 5-6.

28 Gratton, chap. 1.

29 Annette Garrett, "Historical Survey of the Evolution of Casework," *Social Work* 30 (June 1949): 219-29, quote on 220, also see Gordon Hamilton, "Some Characteristics of Social Case Work," in *Proceedings of the National Conference of Social Work* (University of Chicago Press, 1923), pp. 334-37. And for continuity in British work training, see Chris Jones's excellent article, "Social Work Education, 1900-1950," in *Social Work, Welfare and the State*, ed. Noel Parry et al. (Beverly Hills, California: Sage Publications, 1979).

30 Mary Richmond, *What Is Social Case Work?* (New York: Russell Sage Foundation, 1922), p. 153.

31 For a similar argument about professionalization, see Philip Richard "The Effects of Professionalization on the Development of Social Work Education in St. Louis, Missouri, 1901-1930" (Ph.D. diss., Washington University, 1977). Conant's description of the Boston chapter of the American Association of Social Workers argues that the search for professional status diverted attention from reform (*Establishing a Professional Group*, pp. 9-10, 16-17). A similar argument is made by Foreman (above), pp. 41-45. The centrality of the casework method to the appeal for professional stature is maintained by Lubove, pp. 19-20.

32 Richmond, pp. 99, 151, 159, 173, 248, 257-58, quotation, p. 151.

33 *Family* (February 1927), p. 310.

34 Gratton, pp. 191-93, 198-99, on her personal supervision of clients' stay, see McLeod to Mrs. Corinne P. Margusse, March 12, 1929, General Correspondence, 1930's-40's, Home for Aged Men Archives, Boston, Mass.

- 35 M. Francis Warren, "Old Age Relief a Case-Work Job," *Survey* 63 (February 15, 1930): 573-74.
- 36 BCSEA, *Bulletin*, no. 5 (January 1926), p. 8. See also Coll. (n. 26 above), p. 79.
- 37 Robert A. Hoffmann to Helen Alfred of the American Association for Old Age Security, October 10, 1929, in Abraham Epstein Papers, Columbia University, New York, quoted in Chambers (n. 20 above), p. 165.
- 38 Gratton, pp. 201-4, quotation from the Home for Aged Men, *78th Annual Report* (Boston, 1939), pp. 9-10.

The Golden Age Clubs

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In the 1940s, old age clubs became vehicles of social engineering. This article describes the Golden Age Clubs in Cleveland, where the movement originated and was strongest. It analyzes the clubs as the product of a method of democratic social control with its roots in the social theories of John Dewey, William H. Kilpatrick, and Marjorie Follert.

Old age clubs of one sort or another have been part of the American scene since the beginning of this century.¹ This "generic" club activity was, however, the product of unrelated and occasional impulses. Not until the 1940s did old age clubs take on a kind of "brand-name" identification as Golden Age Clubs. At that same time, they became vehicles of conscious social control.

Of course, Golden Age Clubs were never simply or entirely mechanisms of social control. They provided essential services and a good measure of the companionship that many older persons so badly need and wanted. From the beginning, however, the clubs were more than social service institutions. The Cleveland foundations, social welfare agencies, and social group work academics who together created the Golden Age Clubs approached their joint venture with a shared ideology that defined social control of the aged as a necessity. According to this ideology, older persons had become so much fodder for the deviant, fantastic, and dangerous schemes of demagogues—Germany's Hitler, America's pension advocate Francis Townsend. This irrational behavior of the elderly was, these Cleveland reformers reasoned, the product of a half century of economic dislocation and community disintegration.

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The Golden Age Clubs were designed to reintegrate an embittered and isolated older generation into American social life and, more important, to insure that older persons properly studied political issues, voted for major party candidates, shunned Townsend and other undesirable leaders, and otherwise acted like reasonable and responsible Americans. All this was to be accomplished by the club, small group discussion, leadership, and education—methods that may be described as “democratic.”

It happened first in Cleveland. The single club established at Goodrich House Settlement in June 1940 became fifteen clubs with some 500 members by late 1944. In 1952 there were thirty-five clubs in greater Cleveland, serving about 2,000 old people.² By 1950 the movement had taken root in Philadelphia, St. Louis, Chicago, Cincinnati, Pittsburgh, New York, and Detroit.³

Method

The Cleveland experience is told here through the medium of collective biography. Three persons, each representing an important aspect of the movement, played crucial roles in the creation of the city's Golden Age Clubs. Margaret Wagner, executive director of the Benjamin Rose Institute, succeeded in securing financial support from the Rose Institute and other city foundations. Grace Coyle, a social work professor at Western Reserve University, gave the clubs an intellectual rationale. Her group work theories forged the links between the foundations and Cleveland's numerous and active social welfare agencies. Oskar Schulze, a recent immigrant to the United States, was the city's inspirational club organizer and leader.

Margaret Wagner and the Townsend Movement

Margaret Wagner's interest in old age clubs grew out of a decade's observation of the behavior of Cleveland's elderly.⁴ The city's growing population of older citizens had responded to the Great Depression and to the inadequacy of private charity by actively participating in the political system. With their help, Ohio became the first state to pass an old age pension law by a direct vote of its citizens.⁵ Wagner recalled the circumstances surrounding the initial grant made under

the law in November 1934. "The Eagles [International Order of] officiated. There was a parade, the band played, the Governor was present. The master of the Eagles, with drums rolling, presented the first assistance check to an old gentleman who stood up in the mass of citizens to receive great applause. It was apparent that this was going to be used for political effect. It disturbed us at the Rose Institute very much."⁶ Chagrined as first the Eagles and then the American Legion controlled distribution of the state's old age relief funds, Wagner sought to bring the political nature of the process to the attention of state and national governments.⁷ Wagner would not cast a vote for Franklin D. Roosevelt until 1944, and she supported the Social Security Act of 1935 less as a welfare measure than as a repudiation of the poorhouse.⁸ Her full scorn, however, was reserved for Ohio Governor Martin L. Davey, who bid often and directly for the votes of the state's pensioners. Wagner resented his personal style as unnecessarily manipulative and as corrosive of the political system.⁹

Lacking confidence in older voters, Wagner must have been distressed at the enthusiasm for pension advocate Francis Townsend among Cleveland's older citizens. Throughout the 1930s, the Long Beach, California, physician drew large crowds in the city's public arenas. When Townsend brought his national convention to Cleveland in 1936, the *Plain Dealer* described fervent but deluded old people, many of them poor, "seeking the rainbow's end so long as their leader bids them."¹⁰ The paper predicted a backlash of bitterness when the dream dissolved and the defrauded victims awoke. In Townsend's refusal to allow his organization to be run through a representative system, the *Plain Dealer* found a microcosm of the European experience: "The doctor is the dictator. What he says goes."¹¹

Grace Coyle and Social Work

Grace Coyle was one of several social work faculty who had made Western Reserve's School of Applied Social Sciences (SASS) the nation's foremost advocate of group work. (For caseworkers, the operative unit was the family or the individual; group workers concentrated on modifying behavior by placing the individual in group situations.)¹² In a prize-winning paper presented at the 1935 meeting of the National Conference of Social Work, Coyle argued that the group was a natural construct for a society whose direction tended "to be determined by group pressures of various kinds."¹³ In such a society, it was vital that people constantly have "the experience of democratic practice."¹⁴

Through group work, citizens would come to understand their role in the "organizational life of the community."¹⁵

In Cleveland, Coyle's advocacy set the stage for the Golden Age Clubs. She regularly spoke to social organizations, gradually picking up support for her central concept of using group work to promote social responsibility.¹⁶ After one of her presentations at the Alta Social Settlement in 1937, headworker W. T. McCullough summarized her point of view. "It is the aim of the group leader," he wrote, "to help the group members re-evaluate their experiences in terms of social purposes—in other words, to lead group members to understand that they are part of a dynamic changing society in which they have some responsibility for exerting their influence toward making a better society in which to live. This . . . is . . . an objective which is essential and necessary to the continuation of democracy."¹⁷

Although group work continued to gain in stature as a technique of social control, until the late 1930s its influence extended only to those dealing with youth. A logical mechanism for harnessing the collective energy that youth normally channeled into gangs, which in 1938 seemed so menacing, group work seemed inapplicable to an elderly population defined as passive and inactive.¹⁸ It was Oskar Schulze who demonstrated the fallacy in this point of view.

Oskar Schulze, Club Organizer

As a Dresden city councillor and third mayor of Leipzig, Schulze had taken on major old age welfare responsibilities.¹⁹ His years in Weimar and Nazi Germany left him with memories and conceptions of history that profoundly influenced his tenure in Cleveland. According to Schulze, the agricultural Germany of the first half of the nineteenth century had emerged from the Franco-Prussian war of 1870–71 as an industrial nation. "In all cities," Schulze wrote, "the factories grew up like mushrooms on a muggy summer day. . . ."²⁰ Here was German history as Schulze recalled it: The boom of the early 1870s was followed by a severe depression, unemployment among industrial workers, and finally, in 1889, by social legislation. The First World War left Germany in chaos, many of its people without adequate food, shelter, and clothing. The crushing blow was administered by the catastrophic inflation of 1923, when the middle class lost much of its property and wealth.²¹ Those who had managed to save for their old age found their money worthless and had to resort to public relief. Although pensioners received substantial private aid and relief allowances higher than normal, they

remained embittered and despairing, "easy prey for radical doctrine. Their demands became impossible to fulfill, and they "eagerly hearkened to Hitler's siren call."²⁵

Schulze and his wife, Suzanne, arrived in Cleveland from Turin in January 1937. She soon found a teaching position in SASS. Because he spoke no English, Oskar Schulze had more difficulty securing meaningful employment. Following a series of odd jobs, he left in January 1940 for Chicago and a position at the Olivet Institute settlement interested in recreation for old people.²⁶ Schulze began inviting the old people in the neighborhood for weekly social gatherings. As he would often emphasize, Schulze found the old people suspicious, mistrustful, and reticent—even among themselves. He learned of great loneliness and "came across deplorable living conditions such as I had never before seen or imagined."²⁷ "Many of these stories," he concluded, "closely paralleled [*sic*] those of their kind in Germany; only it was Depression rather [*than*] the inflation, which brought about their impoverishment."²⁸

Within five months Schulze had created a viable old age club with a stable nucleus of thirty members, men and women, from sixty-four to ninety-seven years old.²⁹ Schulze was especially pleased that the members had, at their most recent meeting, elected a group to be in charge of arrangements for future gatherings. "This action," he reported, "is in full accord with my aims to win over the old folks themselves toward a program of active participation in care for the needy aged. Schulze believed that in five months he had seen "shy and distrustful individuals become "a happy crowd of old folks, knit together by a sense of friendship."³⁰

This metamorphosis had political and social implications. During Chicago's primary elections, the old people had begun to come forward with problems and questions. The institute brought in a speaker from a woman's club who explained the workings of the primary system. "The situation that presented itself before the election," Schulze wrote, "afforded ample evidence of the devices employed by various politicians and candidates to ingratiate themselves with the older voters, and how susceptible the latter are to the lure of the demagogue."³¹

The Club Movement Grows: The Benjamin Rose Institute

Schulze returned to Cleveland in the summer of 1940 with this successful experience behind him. He had pieced together and articulated

philosophy of social service that would strike a responsive chord in Cleveland's welfare community, and he now had some facility with English. Alice Gannett requested a demonstration of the club concept in her Goodrich House settlement.³¹

Unlike most of Cleveland's social settlements, Goodrich House had for some time taken a lively interest in the aged, and from a perspective that dovetailed with Schulze's. A strong exponent of the need for vigilance in the maintenance of democratic government, Gannett had moved her settlement into adult education as a device for insuring an intelligent citizenship. She was also familiar with group work concepts.³² Within several months Schulze had duplicated his Olivet experience. Members included a number of Townsend followers.³³

This initial success gave Schulze a vehicle for national publicity and allowed Wagner to overcome the inertia of her board of trustees. In June 1940 she asked the board's consideration of a broad recreational project for older people. According to the minutes of the meeting, "She pointed out that contact with beneficiaries over a period of several years had demonstrated their need for social activity, which in many instances had been provided by Townsend Clubs, and that there was a growing tendency to organize old people in small groups, to be used politically, by such groups as the Townsend Clubs, the Bigelow Plan or Martin L. Davey Clubs. There has been no effort to combat this insidious movement by anything constructive."³⁴ Soon thereafter, the Rose Institute and the Cleveland Foundation agreed to provide funding for a program of Golden Age Clubs.

The Purpose of the Clubs

The clubs were predominantly social institutions. Members played checkers, rummy, and dominoes, they celebrated Christmas, Hanukkah, Easter, and a variety of other holidays, they sat through musical presentations, films, and lectures given by speakers from the Art Museum, the Garden Center, and the Natural History Museum. Despite Schulze's insistence that hours not be wasted in idle gossip, simple talk was a common enough feature of the weekly meeting. Many functions were familial in concept and purpose. Members celebrated birthdays and anniversaries and helped one another in times of distress. When a member was ill or absent, others might come to call; the women sometimes sewed for the men.³⁵

The clubs were expected to reinforce an essentially natural conservatism, first by contributing to a decrease in the conditions of isolation

and rejection that were thought to lead to irrational political activity; second by providing a forum for educating club members in responsible citizenship. In his frequent appearances as a public speaker, Schulze liked to tell the story of a heated debate that had taken place in one club on a possible speaker from the Townsend movement. As Schulze described it, a Mr. K had denounced the idea: "Who would want to listen to such nonsense, there are sounder programs of public assistance to whose improvement we should give our time rather than wasting it on a pipe dream."³⁶ Wagner claimed that golden agers had helped block the Townsend movement's efforts to secure office space in Cleveland to headquarter the organization.³⁷

Education was expected to take place through the group work idea. The role of the leader was crucial. Familiar with group work precepts, Schulze believed that the leader should facilitate rather than control, and encourage participants to arrive at their own conclusions. He assumed that if the process worked as it should, those conclusions would be socially benign.³⁸ Direct education was also attempted. Although there is no evidence that the clubs were employed to "indoc-trinate" members in the sense in which that word is generally used, Schulze, who in the early years of the golden age movement handled much club activity personally, functioned as group leader for discussions on the Townsend movement and Negro slavery.³⁹

The Theory Behind the Clubs

Grace Coyle was the intellectual theorist for the Golden Age Clubs. Critical elements in Coyle's ideology were first systematically articulated by Mary Follett, a Boston social worker who in 1918 published *The New State*. The war, Follett wrote, had laid bare the stagnation of national and international political life. In the United States democracy had been corrupted by those who knew how to manipulate the masses — by Billy Sunday and the Salvation Army, by labor agitators, by political bosses. Genuine democracy meant discovering the natural unity that bound all men. This was a psychological process, unrelated to matters of the ballot box, and was of necessity a group process, best pursued first through local, neighborhood groups and through group discussion, "the sharpest, most effective political tool of the future."⁴⁰

After 1922, Follett's ideas were further developed in a New York City group, the National Conference on the Christian Way of Life, generally known as The Inquiry. Members included Follett, John Dewey, William H. Kilpatrick, Bruno Lasker, Eduard C. Lindeman, and Grace

Coyle, then earning her doctorate in sociology at Columbia. The Inquiry generated a consistent social philosophy grounded in history and incorporating ideas of group process, adult education, recreation and leisure, discussion, and leadership.¹¹ Elaborated and shaped by the social work movement of the 1920s and 1930s and by industrial psychologist Elton Mayo and his colleagues, these ideas would form the intellectual backdrop for Cleveland's Golden Age Clubs.

The central theme, around which all else revolved, was the decline of community in an industrial society. Science and technology and their organizational concomitant, the city, had broken down the old centers of social cohesion—the neighborhood, occupational security (including apprenticeship), the school, the church. The result was massive cultural anxiety, a “chronic insecurity,” wrote John Dewey, “about how to get along in the world.”¹² Because the individual does not participate in collective projects of social planning and control,” according to Dewey, “he feels himself submerged and paralyzed by forces too large and blind, apparently, for any control. The final result is a spirit of fatalism combined with one of reckless speculation.”¹³ Mayo described the “patches of social disintegration, of diminished human association,” that developed in any large-scale social organism.¹⁴ Deprived of community and of group experiences that might foster some sense of the corporate nature of experience and therefore some notion of social responsibility, individuals developed habits of interaction and personality characteristics dangerous to a democratic society.¹⁵

According to Emil Lederer, the German writer whose book, *State of the Masses*, is cited in Coyle's later work, groups functioned to check, balance, and restrict the natural irrationality of people. When the Nazis destroyed organizational life in the German nation, they destroyed the institutions through which the individual was exposed to the “testing, stimulating and provoking influence of his fellow men” and created the preconditions for the totalitarian state.¹⁶ By 1935 it had become impossible to avoid analogies, however facile, between the rise of Adolf Hitler and the emergence of American mass politics under Charles Coughlin, Francis Townsend, Huey Long, and even (in his use of the radio) Franklin D. Roosevelt.¹⁷ Leadership theorist LeRoy E. Bowman argued that insufficient experience in rigorous group decision-making processes had left the nation vulnerable to an unthinking mass movement that could bring dictatorship in its wake.¹⁸ Coyle's emphasis on the perversion of genuine group life and the emergence of a variety of pressure groups, associations, classes, and movements was analogous to Lederer's focus on the crowd and Bowman's on the mob. The solution, exemplified in the Golden Age Clubs, was a rebirth of genuine and independent group life.¹⁹

In the broad sense of the term, the Golden Age Clubs were educational institutions. For Lindeman, Kilpatrick, and others, the purpose of

education, including its adult variant, was not so much the absorption of a given body of knowledge, but the process by which instruction took place. The classroom (and the Golden Age Club) was designed to replicate an ideal larger society; the school would itself function "an ideal community in which pupils get practice in cooperation, self-government, and in the application of intelligence to difficult or problems as they may arise."⁵⁰ The child or adult would emerge with increased awareness of his relationship to the larger group and with the problem-solving habits and skills necessary to resist the temptation to join the mob.⁵¹ The Golden Age Clubs were explicitly designed on this educational model.

Conclusion

Cleveland's Golden Age Clubs had a variety of specific purposes. They were designed to provide entertainment and recreation for a segment of the population that was socially isolated; to facilitate adjustment to retirement and improve physical and mental health; to serve as a substitute for the direct democracy of the Townsend movement, counter general political radicalism, prevent the development of an age-based politics, and encourage responsible habits of political participation. In the 1950s, some believed they would promote interracial harmony. They were part of a larger effort to secure social stability and (for business) to increase productivity by restoring cooperative group life to its proper and lofty place in the hierarchy of social values. At the heart of the methodology was the small group. Cleveland's social service community sought to accomplish its objectives within a framework of democratic decision making and in the context of the city's strong traditions of philanthropy, voluntarism, and the private foundation. This should not obscure, however, the extent to which the clubs were agencies of social planning and their creators social engineers.

Notes

1. Predecessors include the Three-Quarter Century Clubs, established in the 1920s, and the Threescore, or Best to Be, Clubs of Miami and New York City. See the *Three-Quarter Century Club* 1 (January 1928) 1, and Leta Browning, "'The Best Is Yet to Be'" *Magazine of Michigan* 2 (March 1930) 13, 28-29, both in *Three-Quarter Century Club Papers*, Michigan Historical Collections, Bentley Historical Library, University of Michigan, Ann Arbor. *New York Times* (November 19, 1932), p. 17.

2 Handwritten notes of Oskar Schulze, in Benjamin Rose Institute Papers, Benjamin Rose Institute, Cleveland (hereafter referred to as Schulze notes, BRI Papers), Benjamin Rose Institute of Cleveland, "Annual Report of Executive Director for 1955," mimeographed, BRI Papers, p. 8, clippings, *Cleveland Press* (November 8, 1944), Bud Weidenthal, "Golden Age Clubs Mark 10 Years," *Cleveland Press* (January 4, 1952), BRI Papers. I am grateful to the Benjamin Rose Institute for access to their records on this subject, which comprise about one square foot of manuscript and printed materials, including newspaper clippings, photographs, BRI publications, and a small amount of correspondence.

3 Clippings, *Cincinnati Times Star* (April 6, 1946), *Cleveland Plain Dealer* (July 8 1946), BRI, "Annual Report Executive Director, 1955," p. 8, all in BRI Papers. The clubs were originally called Old Age Clubs. The Golden Age name was affixed early, apparently by a member (see Margaret Wagner, foreword to James H. Woods, *Helping Older People Enjoy Life* [New York: Harper & Bros., 1953], p. xi).

4 Wagner was educated at private schools, including the School of Applied Social Sciences (SASS) at Western Reserve. Her first position was as a medical social worker with the City Hospital. The Benjamin Rose Institute, where she would spend most of her working life, was established under the will of Cleveland businessman Benjamin Rose. Under its provisions, the foundation administered an old age pension system, which, for reasons of demography and economics, was completely inadequate to the needs of Cleveland's aged by the time Wagner joined the staff in 1930. This sketch is compiled from clipping, *Cleveland Plain Dealer* (March 20, 1977), pt. 4, p. 16, BRI Papers, Margaret Wagner interview by William Graebner, April 13, 1977, Benjamin Rose Institute, "Brief History of the Benjamin Rose Institute, 1908-1976," BRI Papers, p. 1, BRI, "Annual Report Executive Director, 1955," p. 2.

5 M. L. Brown to Franklin D. Roosevelt, October 12, 1933, and Brown to Roosevelt, November 10, 1933, Franklin Delano Roosevelt Papers, President's Personal File 683, "Old Age Pensions," Franklin Delano Roosevelt Library, Hyde Park, New York.

6 Margaret W. Wagner, "Older Persons Come of Age" address presented at the meeting of the Committee on Older Persons, Welfare Federation of Cleveland, February 1, 1965), p. 2, copy in author's possession. John Culver, professor emeritus, Department of History, Case Western Reserve University, was kind enough to make this document available to me.

7 Ibid., pp. 2-3, BRI, "Annual Report Executive Director, 1955," BRI Papers, p. 9.

8 Wagner, foreword, p. ix, Wagner interview by Graebner.

9 Wagner, "Older Persons," p. 3, Wagner interview by Graebner, Arthur J. Altmeyer, *The Formative Years of Social Security* (Madison: University of Wisconsin Press, 1966), pp. 75-77, *Cleveland Plain Dealer* (January 11, 1939), p. 8.

10 *Cleveland Plain Dealer* (July 20, 1936), p. 6 (editorial).

11 Ibid. See also July 18, 1936, p. 2, March 28, 1936, p. 8 (editorial), January 17, 1936, p. 8, Wagner interview by Graebner.

12 Among other SASS faculty teaching from a group work perspective were W. I. Newstetter and Clara A. Kaiser (until 1934). See Thomas F. Campbell, SASS *Fifty Years of Social Work Education: A History of the School of Applied Social Sciences, Case Western Reserve University* (Cleveland: Press of Case Western Reserve University, 1967), pp. 37, 47, 55-56, W. I. Newstetter, "What Is Group Social Work?" in *Proceedings of the National Conference of Social Work*, 62d Annual Session, held at Montreal, June 6-15, 1935 (Chicago: University of Chicago Press, 1935), pp. 291-99.

13 Grace L. Covle, "Group Work and Social Change," in *Proceedings of the National Conference of Social Work*, 62d Annual Session, held at Montreal, June 6-15, 1935 (Chicago: University of Chicago Press, 1935), p. 394.

14 Ibid., p. 395.

15 Ibid., p. 396. See also Sara Elizabeth Maloney, "The Development of Group Work Education in Schools of Social Work in the United States" (Ph.D. diss., Western Reserve University, 1963), pp. 292, 304, 314-15.

16 *Cleveland Plain Dealer* (May 3, 1935), p. 15.

17 "Annual Report on Alta Social Settlement by W. I. McCullough, Headworker, January, 1937," Alta Social Settlement Papers, Western Reserve Historical Society Library, Cleveland, box 1, folder 1, p. 2, see also "Proposal to the Board of Trustees Relating to the Case Work-Group Work Project," Alta Papers, box 1, folder 1, p. 2.

18 Lucia Johnson Bing, *Social Work in Greater Cleveland: How Public and Private Agencies Are Serving Human Needs* (Cleveland: Welfare Federation of Cleveland, 1938) p. 117.

19. Schulze was a man of some importance in his native Germany. As a Dresden city councillor after the war, he had a measure of responsibility for old people in two large municipal homes, and in 1929, on becoming Leipzig's third mayor, he took on most of the city's social welfare responsibilities. It was there, administering the large, richly endowed Johannes Hospital, that Schulze became convinced that mere provision of physical comforts would not suffice to make old people content, he grew committed to recreation as a form of treatment. He was dismissed in the summer of 1933 for political reasons, and he spent the next three years in Istanbul (sketch compiled from Schulze vita, clipping, *Cleveland Plain Dealer* [July 8, 1946], Oskar Schulze to Miss Wagner, May 14, 1940, Dr. Goerdeler to [unknown], September 21, 1933, Dr. Goerdeler to [unknown] June 4, 1935, all in BRI Papers, file "Schulze, Oskar").

20. Statement by Schulze in *Rose Leaves*, vol. 2, no. 8 (October 1941). Cited issues of *Rose Leaves* are available in BRI Papers, file "Oskar Schulze Papers."

21. *Ibid.*

22. *Rose Leaves*, vol. 3, no. 1 (January 1942).

23. Oskar Schulze, "A Neglected Age of Social Group Work," mimeographed address delivered c. 1940, BRI Papers, file "articles by Oskar," p. 2.

24. Schulze vita, BRI Papers, file "Schulze, Oskar", clipping, *Chicago Daily News* (May 15, 1972), pt. 3, p. 23, BRI Papers, Wagner interview by Graebner, Oskar Schulze "Live Long and Like It: A Brief Description of Recreational Services for Older People," mimeographed (address given at the Annual National Convention of the Associated Lutheran Charities of Minneapolis, Minnesota, May 20, 1947), BRI Papers, file "articles by Oskar," p. 2.

25. Oskar Schulze, "Neglected Age of Social Group Work," BRI Papers, file "articles by Oskar," p. 5.

26. *Ibid.*, p. 1.

27. Mrs. Edw. Ellis to Grace Coyle, May 22, 1940, BRI Papers, file "Schulze, Oskar." Schulze, "Neglected Age of Social Group Work," BRI Papers, file "articles by Oskar," pp. 6-7.

28. Schulze, "Neglected Age of Social Group Work," p. 7.

29. *Ibid.*

30. *Ibid.*

31. Schulze notes, BRI Papers, Wagner interview by Graebner.

32. *Cleveland Plain Dealer* (April 23, 1937), p. 20.

33. Schulze notes, BRI Papers, Oskar Schulze, "Recreation for the Aged," *Journal of Gerontology* 4 (October 1949): 310, the Cleveland Foundation, *Recreation for the Aged* (Cleveland: Cleveland Foundation, 1945), BRI Papers, Benjamin Rose Institute, "Minutes of the Board of Trustees," October 13, 1941, BRI Papers (xerox copies in author's possession).

34. BRI, "Minutes of the Board of Trustees," June 10, 1940, BRI Papers.

35. Compiled from clipping, John Collier, "Low-Cost Recreation Shown," *New Orleans Item* (October 24, 1947), Schulze, "Live Long and Like It," file "articles by Oskar," p. 3. Schulze notes, clippings, Martha Lee, "You Can Help to Entertain Settlement House Old Folks," *Cleveland News* (February 18, 1944), Mrs. Maxwell, "Oldsters' Club Fills Need in Community," *Cleveland Press* (November 8, 1944), Eleanor Piech, "Golden Age Club Brings Sunshine into Lives of Oldsters at Goodrich House," *Cleveland Press* (May 29, 1941), Schulze, "Recreation for Aged," pp. 311-12, all in BRI Papers, Wagner interview by Graebner, Jewish Community Centers of Cleveland, "Report on Golden Age Program," October 18, 1950, Papers of the Cleveland Section of the National Council of Jewish Women (NCJW), Western Reserve Historical Society Library, Cleveland, box 12, folder 4.

36. Schulze, "Live Long and Like It," BRI Papers, file "articles by Oskar," p. 4.

37. BRI, "Annual Report Executive Director, 1955," BRI Papers, p. 9.

38. Schulze, "Recreation for Aged," p. 312, Jewish Community Centers of Cleveland, "Golden Age Program," Papers of Cleveland Section, NCJW, box 12, folder 4. For a theoretical perspective on leadership in discussion situations, see The Inquiry, *The*

Worker and His Job: Outlines for the Use of Workers' Groups (New York: Association Press, 1927), pp. 11–12.

39. Wagner interview by Graebner. When Schulze resigned as director of the Recreation Project for Older People in 1948, the Golden Age Club program had grown too large to be contained within the Rose Institute. It was transferred to the Cleveland Welfare Federation and placed under the direction of James H. Woods. Though Woods and his colleagues carried on Schulze's interest in the relationship between the aged and the political system, they approached the subject from a somewhat different perspective. Whereas Schulze had at times despaired for the existence of the social order should the old follow false prophets, Woods was skeptical of the benefits to be derived from club programs designed simply to keep the aged quiet and to prevent old age pressure groups. Although he did not deny that politicians sought the vote of the old, he envisioned politics less as a battleground of ideologies tugging at the elderly than as a field in which it was appropriate and healthy for the aged, who had given up so much in life, to be involved. The clubs and the new Golden Age Centers (structures exclusively for the use of the aged) could help foster in the aged a necessary set of values and responsible voting behavior. Neither Woods nor Ralph Leavenworth, president of the board of trustees of the Golden Age Center of Cleveland, was above raising the specter of old age politics to secure funds from the foundations; the centers were justified, like the clubs, in part for their anticipated antiradical impact. But the sense of crisis that was so much a part of Schulze's world view was gone. See Woods, *Helping Older People*, pp. 4, 5, 63–64, clipping, Weidenthal, "Golden Age Clubs," BRI Papers, BRI, "Annual Report Executive Director, 1955," BRI Papers, pp. 8–9, *Cleveland Section Bulletin*, vol. 14 (May 1942), BRI Papers, Jesse Ruth Robinson, "Dictators," *Golden Age Center News* 2 (July 1957): 9, *Golden Age Center News* 1 (October 1955), in Finest Bohn Collection, Freiburger Library, Case Western Reserve University, Cleveland, James H. Woods, "Fun in the Golden Years," typescript, July 1948–February 1950, Cleveland Foundation Papers, box 7, file "Welfare Federation—Recreation for Aged," p. 46, Ralph Leavenworth to trustees of Cleveland Foundation, July 14, 1954, Cleveland Foundation Papers, Western Reserve Historical Society Library, Cleveland, box 1, file "The Golden Age Center of Cleveland."

40. Mary Parker Follett, *The New State: Group Organization the Solution of Popular Government*, 3d ed. (New York: Longmans, Green, 1920), pp. 212 (quotation), 5, 89, 4, 159, 208, 192–202, 205. Like so many social commentators over the next several decades, Follett modeled her ideal society on the corporate, communal society that had presumably existed in the medieval world.

41. Clarke A. Chambers, *Seedtime of Reform: American Social Service and Social Action, 1918–1933* (Minneapolis: University of Minnesota Press, 1963), pp. 102–4, *The Inquiry: Worker and His Job*, pp. 11–12.

42. John Dewey and John I. Childs, "The Social-Economic Situation and Education," in *The Educational Frontier*, ed. William H. Kilpatrick (New York: Century Co., 1933), p. 54.

43. *Ibid.*, p. 58.

44. Mayo, *The Psychology of Pierre Janet* (1952, reprint ed., Westport, Conn.: Greenwood Press, 1972), pp. 124–25.

45. *Ibid.*, pp. 10–15, 77, 89, 91, 104–5, 107, Elton Mayo, *The Social Problems of an Industrial Civilization* (Boston: Harvard University Graduate School of Business Administration, 1945), pp. 7–8, 30–32. See also Sidney B. Fay, "The Idea of Progress," *American Historical Review* 52 (January 1947): 231, 243, 245, and Grace Coyle, *Group Experience and Democratic Values* (New York: Woman's Press, 1947), p. 13.

46. Emil Lederer, *State of the Masses: The Threat of the Classless Society* (1940, reprint ed., New York: Howard Fertig, Inc., 1967), p. 206, also chap. 4.

47. Lederer, pp. 44–45.

48. LeRoy E. Bowman, "Dictatorship, Democracy, and Group Work in America," in *Proceedings of the National Conference of Social Work*, 62d Annual Session, held at Montreal, June 6–15, 1935 (Chicago: University of Chicago Press, 1935), pp. 391–92.

49. Charles E. Hendry, "Social Group Work," in *Social Work Year Book 1941* (New York: Russell Sage Foundation, 1941), 6: 526, Coyle (n. 13 above), p. 394. See also Mary K. Simkhovitch, *Group Life* (New York: Association Press, 1940), pp. 74–75.

50 Boyd H. Bode, "The Confusion in Present-Day Education," in *The Educational Frontier*, ed. William H. Kilpatrick (New York: Century Co., 1933), p. 19. A professor at the New York School of Social Work after 1924 and later consulting director of Division of Recreation of Harry Hopkins's Works Progress Administration, Lindeman argued in *The Meaning of Adult Education* (1926) that the reconstruction of meaning group life must begin in manageable form, with each individual working to bring some measure of intelligent influence to bear on available local groups and group situations (the neighborhood, the home) or small units of larger groups (the trade union). A education was designed to train individuals for participation in collective experience the mainstays of "contributory personalities" (see Eduard C. Lindeman, *The Meaning of Adult Education* [New York: New Republic, Inc., 1926], pp. 56–57, quote on p. 56). Lindeman's background, see Gisela Konopka, *Eduard C. Lindeman and Social Work Philosophy* (Minneapolis: University of Minnesota Press, 1958).

51 Follett (n. 40 above), pp. 368–70; Bruno Lasker, *Democracy through Discussion* (New York: H. W. Wilson Co., 1949), pp. vi, vii; Coyle (n. 13 above), pp. 399, 400; Simkovitch, pp. 18–27, 97–98; William H. Kilpatrick, "The New Adult Education," *The Educational Frontier*, ed. William H. Kilpatrick (New York: Century Co., 1933) 147, 151, 157–58; Joseph Ernest McAfee, "Middle-aged White-Collar Workers on Economic Slack," *Annals of the American Academy of Political and Social Science* 154 (March 1931): 34–35.

52 Barry D. Karl, "Philanthropy, Policy Planning, and the Bureaucratization of Democratic Ideal," *Daedalus* 105 (Fall 1976): 129–49.

Foster Children's and Parents' Right to a Family

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This article presents evidence from court decisions, state laws, and model statutes demonstrating that foster children have an emerging legal interest in stable parental relationships. It notes the need children have for stable parental figures, presents a historical overview of the legal status of children and the family, traces the growing recognition of children's interests in custody and child-placement cases, and considers the issue of balancing the child's emerging interest in stable and permanent relationships against established interests of the natural family.

The child welfare system seeks to provide children with protection from neglect and abuse, both by services to their families of birth and by placement in foster care. Because foster care lacks stability and a sense of commitment and permanence, it usually does not provide the environment that children need in order to feel unconditionally loved and valued. When children and their foster parents do make the kinds of emotional commitments to each other that characterize healthy families, their relationships do not have the same recognition and protection that society accords to families with natural-born or adopted children.

However, a growing awareness of problems related to the impermanence of foster care has recently begun to affect court decisions, state laws, and model statutes. As a result, foster children, like other children who are not in the care of natural parents, have an emerging

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legal interest in stable, continuous, and permanent relationships with their long-time caretakers.

This paper considers the issue of balancing the child's interest in a stable and permanent family against the interests of parents. The first section notes the need children have for stable parental relationships and suggests that a changing awareness of people's needs affects societal conceptions of human rights. The second section presents a historical overview of the legal status of children and the family, with emphasis on child custody and the role of the state in matters affecting the family. The subsequent sections trace the recognition of children's interests in different types of court cases: third-party custody and adoption disputes, contests involving agency foster parents, and other termination of parental rights cases. The final section evaluates the relationship between the child's emerging interest in a stable family life and the established interests of the natural family.

Children's Need and Legal Change

Loss of significant people is an experience that is common to everyone. The universality and importance of this experience has long been recognized, and each of the founders of the major schools of psychiatric thought has addressed the origins of the fear or distress that people feel when they experience a loss.¹ In 1952 John Bowlby published the first review of the literature concerning "maternal deprivation," which focused on children separated from their primary care givers during infancy.² This early maternal deprivation research, which had serious methodological and definitional flaws, has been followed by extensive work by theoreticians and researchers to sort out the conditions under which separation from parents harms children.³

While children who are emotionally deprived following separation may suffer long-term harm, young children who are placed with substitute parents who provide love and nurture quickly begin to attach their feelings of identity, security, and love to the new caretakers. This concept of reattachment to new parental figures has been labeled "psychological parenthood" by Goldstein, Freud, and Solnit, whose writings have triggered much of the recent attention to the issue of children's rights in substitute care.⁴ According to their analysis, permanent or long-term separation from any psychological parents, whether they are the child's biological parents or surrogates, is traumatic. Whether and how quickly a child forms an attachment to surrogate parents is related to the child's developmental level, past separation experiences and the circumstances of the placement.

It should be noted that the theory of separation and attachment espoused by Goldstein, Freud, and Solnit has been criticized both for being grounded in psychoanalytic thought and for reliance on sparse and less-than-rigorous research.⁵ However, there is little disagreement with the basic proposition that children, particularly young children, become attached to and develop parent-child relationships with the adults who meet their daily physical and emotional needs for extended periods of time. Even such critical reviewers of Goldstein, Freud, and Solnit's work as Strauss and Strauss acknowledge that "the [psychological] findings relied upon here are bedrock, not seriously disputed among the contending schools and camps, or by skeptical outsiders."⁶

In light of what is generally conceded about the effects of separation on children and about their need for stable and continuous parental relationships, it is obvious that much foster-care research can be read as an indictment of the system that is intended to provide care for dependent, neglected, and abused children. The tendency to remove children from their own homes unnecessarily, to subject them to a series of foster homes, and to keep them in care instead of rehabilitating their own families has been well documented.⁷

A complex group of problems is responsible for the failure of the child protection system to meet the needs of children and families more adequately. Recent changes and proposed changes in the law concerning child protection and child placement reflect in part the recognition that older statutes and legal precedents have contributed to the shortcomings of the child welfare system.⁸ This process of legal change in response to new social science theory and research is not completely understood. Roscoe Pound coined the phrase "the socialization of law" to describe the phenomenon, while Rosen describes "sociological" or "factual" jurisprudence as drawing from the social sciences.⁹ Despite the vagueness and controversy that surround this process of legal evolution, changing perceptions of human needs have in fact had an influence on society's conception of human rights.

The evolving rights of mental patients both illustrate the process of change and provide a partial parallel to the developing rights of children. The "right to treatment" for the involuntarily committed, which was established by *Rouse v. Cameron* and *Wyatt v. Stickney* and limited by *O'Connor v. Donaldson*, was apparently first articulated in the medical literature in the early 1960s.¹⁰ Although this right was first based on statutory language, it has also been considered to have limited constitutional standing.¹¹

The parallel between the constitutional rights of mental patients and foster children is not an exact one. Adults have a recognized fundamental right to liberty that limits the power of the state to require their confinement. While children are not usually considered to have such a right, some authors have argued that children do have a right

to care and custody by their biological parents.¹² If this right is related to the privacy rights that individuals have in certain family matters then it may have a constitutional basis. In that case, the involuntary commitment of mental patients and state intervention to take custody of children may raise related constitutional issues and place similar burdens on the state. The state relies in part on its *parens patriae* authority to act in the best interests of incompetents when it requires involuntary treatment for the mentally ill.¹³ It can be argued that the same authority requires the state to provide foster children with the "treatment" they need, stable relationships with nurturing surrogate parents.

Although few authors make constitutional arguments concerning the rights of foster children, it is apparent that children's interest in stable and continuous relationships is receiving recognition. The following sections explore some of the judicial decisions, statutes, and model statutes that reflect that recognition, beginning with a historical overview of the legal status of children and the family.

Legal Status of Children and the Family

Common law.—Under English common law, which remains part of the legal heritage of the United States, the primary legal interests concerning child custody were the father's "natural right" to his offspring and the *parens patriae* authority of the state. In England, fathers of legitimate children had an almost unrestricted right to custody until well into the nineteenth century. It should also be noted that common law did not recognize adoption, even with parental consent; parental rights could not be abrogated, even by the parents themselves.¹⁴

The *parens patriae* authority of the state, which first emerged to protect the crown's interest in the protection of property rights, was originally exercised over incompetent adults. The *parens patriae* power eventually led the Court of Chancery to exercise jurisdiction over minors who were heirs to property. It was in this context that the principle of the "benefit of the child" emerged to guide the court in its decisions relating to children.¹⁵ However, not until *In Re Spence* (1847) did the court extend its jurisdiction to include the protection of children's interests in the absence of property.¹⁶

Another common law doctrine concerns those who stand in place of parents to children. Katz observes that, while acting *in loco parentis* involves assuming parental duties to support, educate, and provide

care for a child, "the parental right to legal custody does not attach to foster parents" under common law.¹⁷

U.S. statutes and courts.—In the United States, as in England, the law concerning child protection and child custody has developed beyond these underlying common law doctrines. Early in North American history, the concept of adoption was introduced through those territories and states that had inherited the French or Spanish civil law tradition. Adoption statutes were nonexistent in the United States until the 1850s, and the earliest of them required consent of any parents who were living to the adoption of minor children.¹⁸

Custody transfer without parental consent evolved even more slowly. Over the succeeding hundred years, two legal doctrines emerged for settling custody disputes between parents and third parties. The "parental right" test "holds that a biological parent is entitled to custody unless he is affirmatively shown to be unfit," while the "best interest of the child" test allows courts to weigh a variety of factors, including parental fitness, characteristics and preferences of the child, emotional ties, and physical environments.¹⁹

State intervention in the parent-child relationship raises a somewhat different set of issues than disputed custody between parents and third parties. As recently as 1978, it has been observed that "no uniform test has been accepted to fully evaluate the rights of a parent to the continuing care and custody of a child who has been labeled abused or neglected."²⁰ In involuntary termination of parental rights cases, states have sometimes enacted statutes that require both parental actions that show lack of fitness and the "best interest" test. Until quite recently it was rare for U.S. courts to terminate parental rights involuntarily in cases of state intervention without proof of parental unfitness.²¹

However, there is a trend in legislation and jurisprudence to allow permanent transfer of custody and involuntary termination of parental rights on the basis that the child has developed strong emotional attachments to surrogate parents or on the related basis of the length of time the child has lived away from his natural parents.

Termination of parental rights, like other state intervention with families, inevitably raises constitutional issues concerning fundamental liberty rights. The doctrine of "substantive due process" has emerged over the past sixty years as a constitutional restriction on the power of the state to legislate in certain areas of family privacy or autonomy. This doctrine is grounded in the Fourteenth Amendment guarantee that individuals may not be deprived of life, liberty, or property without due process of law. In a recent article the *Harvard Law Review* traces the development of the substantive due process doctrine and concludes that "the Court has recognized as 'fundamental' the right of individual autonomy in activities relating to marriage, procreation, contraception,

abortion, family relationships, and the rearing and education of children."²²

Recent developments.—Lately, legal commentators have argued the recognition that the Supreme Court has historically given to privacy rights extends to the protection of "family integrity" in protection, child placement, and termination of parental rights proceedings.²³ This concept of "substantive due process" protects the family is not as renowned as procedural due process, which requires fair and adequate legal procedures in cases where life, liberty, and property are at stake.

The U.S. Supreme Court decisions in *Smith v. Organization of Families for Equality and Reform* (1977), *Lassiter v. Department of Services* (1981), and *Santosky v. Kramer* (1982) all address the Four Amendment rights of parents in child welfare cases.²⁴ *Smith v. O* which also considers the rights of foster parents to due process discussed below in the context of legal disputes involving foster parents. In *Lassiter*, the Court ruled that indigent parents are not always entitled to court appointed counsel in termination of parental rights cases while in *Santosky* it overturned New York's provision that permanent neglect cases be decided on the "preponderance of the evidence" standard. That decision stressed that "the fundamental liberty interest of natural parents in the care, custody, and management of their child does not evaporate simply because they have no model parents or have lost temporary custody of their child to the State." In *Santosky*, the Court acknowledged but declined to weigh the child's interest in a normal family home," which may not be the best for the natural parents. The dissenting opinion in this five-to-four decision argued strongly that the child's independent interest should be weighed.²⁵

The recognition that is sometimes given to the child's interest in a stable and permanent family home must be considered in the context of different types of disputes concerning children. While this review examines several types of conflicts over custody, it focuses primarily on statutes and court decisions that affect the continuity and permanence of foster care placements made under state auspices.

Third-Party Custody and Adoption Disputes

Third-party disputes over custody and adoption generally arise in situations where someone other than a parent had cared for the

for a substantial period of time, usually with parental consent. The two competing tests for determining who should have custody are "parental right" and "best interest of the child." The disparity of decisions reached when courts have used the second test is explained in part by the way they have weighted these and other variables. At times the line between the tests becomes hazy, and several authors maintain that the best-interest test may include the presumption that the child's interests are best served by awarding custody to a natural parent.²⁶

Although third-party disputes do not involve the same constitutional issue of family integrity as cases of state intervention, developments in these custody cases have influenced legal thinking about state-initiated child protection and termination of parental rights. Therefore, this section considers the extent to which courts now recognize that the best-interest test often requires denying custody to natural parents in conflicts with relatives or others.

A 1963 piece in the *Yale Law Journal* first advocated interpreting "best interests" as "psychological best interests" and awarding custody to the psychological parent. The Yale article, which drew from interviews with Anna Freud, anticipated by several years the later writings of Freud and others.²⁷

Although there had been earlier, similar cases, *Painter v. Bannister* gained notoriety in the mid-1960s as a custody dispute that was settled on the basis of the best-interest test with attention to the child's need for continuity and stability.²⁸ In that Iowa case, the strong relationship between the grandfather and the child was a determining factor in the decision not to order the child's return to his natural father. Numerous custody cases have since been decided on similar bases. For example, in a 1973 New York Superior Court case, *In the Matter of Catherine S.*, the judge allowed a child to continue to live in the privately made placement where she had lived for a year and a half because the court found that her caretakers had become her psychological parents.²⁹

Since that case, the New York Court of Appeals (State Supreme Court) has produced some of the most child-oriented case law in the country. *Bennett v. Jeffereys* (1976) was a particularly influential case where a child in private placement was not supervised by any agency. The fifteen-year-old single mother placed her newborn infant with an older family friend, who agreed to return the child at a later time. When the biological mother wanted her child back eight years later, the surrogate mother sought court-ordered custody. Lower courts ruled in favor of the biological mother on the basis of the doctrine, then traditional in New York, that the best-interest test includes the presumption that vesting custody in biological parents is in a child's best interests. However, the Court of Appeals overturned that doctrine and introduced the concept that "extraordinary circumstances" can

lead to loss of parental rights despite parental fitness "Unfortunate or involuntary disruption of custody over an extensive period of time" was ruled to be such a circumstance.⁴⁰

Rulings in other jurisdictions also illustrate recognition of the child's interest in continuity of care. For example, Veverka has traced the development of the parental right and best-interest tests in a series of Illinois cases. The first case to question the doctrine of parental right was *People v. Weeks* (1923), in which nonparents were awarded custody of a child they had raised for ten years. The best-interest test, with attention to continuity for the child, finally emerged as paramount in Illinois custody disputes with the state supreme court decision *People ex rel. Edwards v. Livingston* (1969).⁴¹ However, both Veverka and Litt, the latter having examined the case law in New Jersey, conclude that in adoptions parental rights must still be weighed.⁴²

Another type of case involves a parent who formally consents to an adoption and later rescinds that consent. Inker summarizes the events that led to the famous 1971 "Baby Lenore" case (*Scarpella v. Spence-Chapin Adoption Service*) in this way: "Baby Lenore was placed with an adoption agency four days after birth. Ten days later, the natural mother signed a surrender document and seventeen days later the child was placed with a family for adoption. Five days after placement, the natural mother contacted the agency, recanted her action and requested the return of her daughter. The request and the refusal culminated in the natural mother's filing of a petition for a writ of habeas corpus asking that the agency surrender the child to her."⁴³

Although New York courts up to the Court of Appeals ruled in favor of the biological parent, courts in Florida, where the adoptive parents had moved, took into account the attachment of the child to the adoptive parents and ruled in their favor.⁴⁴ Litt notes a number of similar cases and concludes that both "parental right" and "best-interests" criteria have been used when consent has been given and then revoked.⁴⁵ In *In re P & wife* (1971), the New Jersey Superior Court found the best interests of the child to be the controlling ones: "Where the natural parent . . . voluntarily, freely and understandingly gives consent, with a present resolution to abandon parental rights, that consent should be considered irrevocable and binding, absent fraud or some overriding equitable consideration, and assuming that such a result is not inimical to the welfare of the child."⁴⁶

Some proponents of legal reform take the position that the child's interest in stable parental relationships should have recognition as a legal right, with much less consideration of the circumstances under which the child left the care of the natural parent. Goldstein has advocated recognition of "common law parenthood" or "common law adoption" to protect the child's right to a permanent home with psychological parents.⁴⁷ Goldstein, Anna Freud, and Albert Solnit have

elaborated this concept into a broad proposal that would fundamentally alter the present legal view of child custody.³⁸ Although their proposals for legal change have met with mixed reviews, the views of these authors have been widely cited by courts in decisions that would effect a child's continuity in the home of surrogate parents.³⁹ Other authors have advocated less fundamental changes that would also promote stability and continuity for children. In their proposed "Bill of Rights for Children," Foster and Freed state that each child has a moral right and should have a legal right to parental love and an environment that promotes growth. They elaborate that "by parental love is meant the affectionate relationship between those who stand in positions of parent and child. This does not necessarily mean the biological parents and child, but may mean those who have such a psychological relationship."⁴⁰

Foster Parents as Interested Parties

Custody disputes involving agency foster parents differ from disputes with other third parties because of the state's frequent initial role in removing children from the care of their biological parents and because of contractual issues between foster parents and agencies. Since private or public child-placing agencies have legal custody of most foster children, direct custody conflicts between natural parents and foster parents are uncommon. Unlike agencies, which are parties to any suits affecting custody, foster parents in many jurisdictions have been denied party status in suits between biological parents and agencies.⁴¹ Therefore, two types of situations involving foster parents are discussed here. In the first, an agency seeks continued or permanent custody of a child, citing the child's stable relationship with foster parents. In the second type of situation, foster parents oppose the agency's plan for a child because of their relationship with the child. Obviously, the interests of foster children and of natural parents are affected in both types of suits.

Bennett v. Jeffries, the third-party case that introduced the concept of "extraordinary circumstances," has been repeatedly cited by New York judges as a precedent in foster care cases.⁴² In a 1977 decision under the state permanent neglect statute, a judge expressed the opinion that in *Bennett* the Court of Appeals "finally recognized the best interests criteria and the psychological parent school of thought was the overwhelming and perhaps, in practical application, the only factor in deciding any case in which the future of a child is at stake."⁴³ In another

state proceeding in 1977, the Court of Appeals instructed a lower court to reconsider its decision in light of the standards set forth in *Bennett*.¹¹

By 1977, New York's foster care statutes had been revised to reflect and codify some of the recent court decisions. The permanent neglect statute requires that agencies make diligent efforts to encourage and strengthen children's relationships with their parents before parental rights can be terminated, "when such efforts will not be detrimental to the best interests of the child."¹⁵ In *In the Matter of Corrine Hirsch* (1978), an appellate court ruled that "prolonged residence of the child with foster parents" was an extraordinary circumstance that excused the agency from diligent efforts to reunite the biological family. The judge cited the "strong psychological ties" that the child had developed in the foster home.¹⁶ Also in 1977, at least two New York decisions terminated parental rights on the basis of the best-interest test in the absence of proof of any statutory grounds.¹⁷

In other states, psychological ties with foster parents have also received judicial recognition. Whitten reports a series of similar cases in Illinois, and Bergman provides analysis of the appellate decision in the Georgia case of *In re Levi*.¹⁸

Foster parents also become involved in cases where they and the agency disagree about a placement decision such as the removal of a child from the foster home. Legal contests between foster parents and child placing agencies are frequently related to the way agencies have traditionally viewed foster care.

Although the earliest foster care programs intended that placed children would grow up in their foster homes, modern child placement theory has viewed foster care as being a fairly brief service.¹⁹ The goals for the child are almost invariably return to the home of the natural parents or adoption, but these goals are often hard to achieve. Despite the recognition that foster care is long-term or permanent for many children, many agencies still require foster parents to sign agreements that the agency may remove children from their home at any time.²⁰ Foster parents who resist removal have been held as having violated contractual agreements, although that legal approach to the problems of child placement has been criticized by family law experts: "The main reason for the [*Marchese*] decision seems to be that the foster parents in the placement contract with the agency had stipulated that the child was placed in the home 'not with a view toward adoption,' and that they agreed to return the child upon request at any time in the absolute discretion of the agency. It is shocking to find modern courts applying the conceptualistic principles of commercial law to the human problems involved in placement cases. There should be no covenant running with the child, and the child's actual best interest ordinarily should be decisive."²¹ Nevertheless, the "contractual" nature

of the foster family's relationship with the child is argued in *Smith v OFFER* (1977), the only U.S. Supreme Court decision that has addressed the interests of foster parents.⁵²

Smith v. OFFER tested the constitutional adequacy of New York's procedures for agency removal of children from foster homes in which they had lived for one year or more. The lower District Court decision, which found the state removal procedures to be constitutionally defective, ruled that "before a foster child can be preemptorily transferred from the foster home in which he has been living, be it to another foster home or to the natural parents who initially placed him in foster care, he is entitled to a hearing at which all concerned parties may present any relevant information to the administrative decisionmaker charged with determining the future placement of the child."⁵³

Smith v. OFFER overturned the lower court decision primarily because foster families do not have the same liberty interest in family privacy as do natural families. What interests they do have were found to be adequately protected by New York's progressive Social Service Law and procedures. However, the court did not rule on the question of whether the foster child has a constitutionally protected interest, as the lower court had. As Dobbs has observed, "The United States Supreme Court has not explored whether a child has a constitutional right to a known and adequate home."⁵⁴ It is significant that in *Santosky v Kramer* the Court does imply that the child's interest in "a normal family home" is a consideration in the decision of whether to terminate parental rights, after parents have been found to be unfit.⁵⁵

In addition to judicial efforts to safeguard the child's interest in stable relationships with surrogate parents, various statutory provisions and proposals have sought to further the same goal. In New York, foster parents are considered interested parties with the right to intervene in any custody proceedings after the child in question has been in their home for twenty-four months. Foster parents also have "preference and first consideration" as adoptive applicants.⁵⁶ Similar safeguards have been advocated for some time in the legal literature.⁵⁷

Under the "Model Statute for Termination of Parental Rights" developed by the National Council of Juvenile Court Judges, one of the factors to be considered in termination cases is whether the child "has become integrated into the foster family to the extent that his familial identity is with that family."⁵⁸ Similarly, the "Standards Relating to Abuse and Neglect" developed by the Institute of Judicial Administration and the American Bar Association (IJA-ABA) provide that regarding termination: "a child should not be removed from a foster home if the foster parents are unwilling or unable to adopt the child, but are willing to provide, and are capable of providing, the child with a permanent home, and the removal of the child from the physical custody of the foster parents would be detrimental to his/her emotional

wellbeing because the child has substantial psychological ties with foster parents."⁵⁹

It has already been noted that the legal reforms advocated by Stein, Freud, and Solnit would fundamentally change existing custody law. With certain safeguards for natural parents in some circumstances, they propose the creation of a new status, foster "with tenure": "Non-adoptive but permanent relationships should be given recognition as *care with tenure*. Such children would be insulated from intrusion by state agencies and former parents. They could enjoy the continuity of care and family membership usually associated with adoption."⁶⁰ This proposal is designed to protect children in long-term foster families from both kinds of disputes that have been described here: those with natural parents and those with agencies.

Termination of Parental Rights

Many of the legal issues, developments, and proposals relevant to the termination of parental rights have already been discussed in the context of disputes involving foster parents. What remains to be presented are termination statutes and proposals that are designed to facilitate termination of parental rights so that children may be placed in stable and permanent homes, whether or not they have previously found such homes as foster children.

Some states have recently sought ways to terminate parental rights that are not possible under state statutes that provide narrow definitions of unfitness. The common feature of these new statutes is that they establish ways to terminate parental rights after a child has been in foster care for a set period, often one or two years. In *San Kramer* the Supreme Court did not take issue with New York's provision for termination if "permanent neglect" is established after a child has been in care. The only part of the statute that was ruled unconstitutional was the standard of proof. The required standard of clear and convincing evidence is widely used, and it was already required in other New York termination cases.⁶¹ While the higher standard will require agencies to establish facts more convincingly in court, the Supreme Court's decision leaves intact New York's statutory approach to termination of parental rights for children for permanent placement.

California statutes include provisions similar to New York's terminating parental rights when children have been in foster care for two years or longer.⁶² In contrast, Maryland's termination statute provides even stronger protection to the child's interest in stability and

manence. After a child has been in care for two years or longer, the burden of proof shifts to the parents to prove that termination is not in the child's best interests. A similar shift in the burden of proof is also part of the proposals for statutory reform that have been made by the joint IJA-ABA commission.⁶³

Like state statutes, proposals for statutory reform take varied approaches to protecting the foster child's interest in stability and continuity. Goldstein, Freud, and Solnit's schema would not terminate parental rights except in favor of an already-established surrogate parent. In such cases transfer of rights would be semiautomatic. The state would never be in the position of holding all of the parental rights over children and of looking for someone to whom to transfer them. In contrast, each of the three statutes proposed by IJA-ABA, Michael Wald, and the Law and Child Development Project of Boston College Law School would allow but not require the state to terminate rights after a child had been in care outside of the parental home for a certain period, regardless of whether placements up to that time had been stable and continuous.⁶⁴ While either type of proposal would do more to further children's interests in their relationships with substitute parents than many state laws, those that allow termination in the absence of a stable relationship with surrogate parents depend heavily on the ability of child placing agencies to find permanent homes for children.

Child's Interest versus Parents' Interest

The constitutional rights that protect individuals from state intervention in certain matters of marriage, procreation, and child rearing have already been noted. In light of the child's emerging independent interests, family privacy rights are considered here in the context of two types of state action: initial intervention in the parent-child relationship to provide protection from abuse or neglect, and ultimate termination of parental rights.

Initial intervention.—Serious criticisms of the system of child protection and child placement have included the charge that the state too frequently deprives parents of legal custody without the compelling justification of serious harm to the child. Several major proposals for statutory reform, which are cited here for their support of the child's interest in continuity, also define narrow grounds for initial state intervention and foster care placement.⁶⁵

The emerging legal interest that children have in stable homes does not conflict with family rights to be free from state intervention. On

the contrary, restriction of the grounds for state intervention with families would promote stability and continuity for children within their families of birth.

Limiting state intervention is also consistent with the argument that children have a "right to care" by their natural parents. In his philosophical "normative theory of juvenile justice," Houlgate notes the child's claim to "be with and be cared for by his parents," while in the legal literature Sutton asserts for children "a constitutionally protected right to the care and companionship of their natural parents."⁶⁶ This concept has already been mentioned in the context of the possible parallel between the position of the state in the involuntary placement of children and in the involuntary commitment of mental patients.

Both Houlgate and Sutton see the "right to care" as being infringed by termination of parental rights. However, this right is primarily affected by initial state intervention and placement of the child in foster care. It is the parents' loss of physical possession of the child that deprives both of companionship and of parental involvement in providing care. Care by parents ends when a child is placed in the home of a nonparent. The idea that the child's right to care then attaches to the surrogate, who assumes the reciprocal duty to provide care, is consistent with Katz's and Eckelaar's analyses of how parental rights and duties are distributed when a child is not in the physical custody of natural parents. This view accords with the status of those who stand *in loco parentis* under common law.⁶⁷

Termination of parental rights.—The second legal contest that affects the rights of both parents and children is the termination proceeding. The central issue is how family privacy or autonomy interests are affected by case law or statutes that allow termination of parental rights on the basis of the child's attachment to surrogate parents or because of the length of time the child has received care outside the parental home.

There is no question that parental interests are affected in such contests. The parent may lose the right to make major decisions about the child's life. Most important, he or she may lose the right to regain physical and legal custody at a future time. If the child is eventually adopted by unknown people, both parent and child may forgo any possibility of a relationship after the child reaches adulthood. These may be grievous losses, but the parents' interest must be weighed against the child's independent interest.

The idea that a right to family autonomy precludes such a balancing of interests ignores the fact that the substantive due process precedents were established in cases where there were no recognized conflicting interests within the family. For example, in *Wisconsin v. Yoder* (1972), which established that the state could not compel Amish parents to send their children to school past the eighth grade, the children were

not represented by counsel and were not known to have independent preferences in the matter.⁶⁸ The fact that children are now frequently represented by counsel in foster care cases openly recognizes that their interests may not coincide with those of their parents or the state. The nature of the child's interest in a proceeding to determine parental fitness was not recognized by the majority in *Santosky v. Kramer* although it was addressed in the dissenting opinion.⁶⁹

One of the schools of philosophical thought that often forms the basis for opposition to state intervention into private life is the libertarian tradition based on the work of John Stuart Mill. Actions covered by the right to privacy have been defended against state intrusion on the grounds that they are "self-regarding" actions that, according to Mill, cannot be regulated by society.⁷⁰ However, this interpretation of Mill cannot provide guidance to the proper role of the state in the intrafamilial issues that are the subject of this paper.

Actions by parents to reclaim a child who has long received care outside of the parental home are not self-regarding. They fall within Mill's other category of action, those that may affect "prejudicially the interests of others." Mill himself makes this point about conflicting interests within the family: "The State, while it respects the liberty of each in what specially regards himself, is bound to maintain a vigilant control over his exercise of any power which it allows him to possess over others. This obligation is almost entirely disregarded in the case of the family relations, a case, in its direct influence on human happiness, more important than all others taken together . . . One would almost think that a man's children were supposed to be literally, and not metaphorically, a part of himself, so jealous is opinion of the smallest interference of law with his absolute and exclusive control over them."⁷¹ In its recent analysis of constitutional issues in family law, the *Harvard Law Review* takes a position that is consistent with Mill: "The family is not an organic unit possessing an intrinsic right of 'privacy' applicable in a variety of contexts. Rather, it is a collection of intimately related human beings, each possessing a number of distinct individual rights, some of which continue to survive when the family is no longer intact. A second, related theme is that the individual rights of family members may conflict."⁷²

The child's interest in stable and permanent relationships is not in conflict with family privacy interests until the child has received care outside the parental home for a sufficient time to allow others largely to assume the place of parents in the child's thoughts and affections. Once that has occurred, the concepts of family privacy, autonomy, and integrity lose much of their meaning. The *Harvard Law Review* article suggests that one integral component of the family privacy right is the child's interest in "being raised by those whose affection and intimate familiarity makes them best suited to the task."⁷³ When the

child's interest becomes displaced from the natural family, the remaining interest of the parents must have substantially diminished weight.

Summary

The statement that children build emotional ties to those adults who act as parents to them, irrespective of blood relationship, may seem like an obvious truth. However, as a relatively newly articulated one, it has only begun to influence our social institutions. This paper suggests that there is evidence, in legislation and judicial decisions, that children have an emerging legal interest in stable and continuous parental relationships. The evidence of this trend is strongest in the types of cases where the "best-interest" test has been used most exclusively and consistently: where a child was voluntarily left by a parent in the care of legal strangers, where a parent at one time renounced parental rights, despite a later change of mind, and where a child has spent a long period of time in the home of the parent surrogates.

The exclusive use of the best-interest test, with attention to the psychological attachments of the child, has also spread from third-party custody disputes to some cases involving state intervention. Foster parents have gained some due-process safeguards of their interests in some states, especially in disputes with placement agencies when return to natural parents is not the issue.

The child's interest in stability would be given much greater weight by the adoption of any of several proposals for statutory reform that have been made during the past ten years. All of these would allow termination of parental rights primarily on the basis of a child's length of time in care. Proposals that would vest parental rights in adults who are already "psychological parents" to the child give the highest degree of protection to the child's interest in stability. Other proposals that allow termination of parental rights in the absence of such psychological bonds are dependent on the ability of a placement agency to provide a stable and permanent home in the future.

Over the long term, there has been a steady growth in Anglo-American law of recognition of the child's interests in custody and termination of parental rights cases. There has also been a history of protection for the family from state interference. It is suggested here that the ordinary strict judicial scrutiny of state intervention in family matters should not apply when there are identifiable, conflicting interests within the family. When a child's interest in stable, continuous, and permanent parental relationships may best be served by awarding custody outside

the natural family, the state does, and should, act to protect that interest.

Notes

1 For a comparison of the major theories of loss, see John Bowlby, *Attachment and Loss*, vol. 2, *Separation Anxiety and Anger* (New York: Basic Books, Harper Colophon Books, 1973), pp. 25–32.

2 John Bowlby, *Maternal Care and Mental Health* (Geneva: World Health Organization, 1952).

3 See World Health Organization, *Deprivation of Maternal Care: A Reassessment of Its Effects* (Geneva: World Health Organization, 1962); Michael Rutter, *Maternal Deprivation Reassessed* (London: Penguin Books, 1972); Bowlby, *Attachment and Loss*; James Robertson and Joyce Robertson, "Young Children in Brief Separation: A Fresh Look," *Psychoanalytic Study of the Child* 26 (1972): 264–315; Christoph Henricke and Ilse Westheimer, *Brief Separations* (New York: International Universities Press, 1965).

4 Joseph Goldstein, Anna Freud, and Albert J. Solnit, *Beyond the Best Interests of the Child* (New York: Free Press, 1973), and *Before the Best Interests of the Child* (New York: Free Press, 1979).

5 See Alfred Kadushin, "Beyond the Best Interests of the Child: An Essay Review," *Social Service Review* 48 (1974): 508–16; Richard E. Crouch, "An Essay on the Critical and Judicial Reception of Beyond the Best Interests of the Child," *Family Law Quarterly* 13 (1979): 49–103; Peter I. Strauss and Joanna B. Strauss, "Books: Beyond the Best Interests of the Child," *Columbia Law Review* 74 (1974): 996–1015.

6 Strauss and Strauss, p. 999.

7 See Michael S. Wald, "State Intervention on Behalf of Neglected Children: Standards for Removal of Children from Their Homes, Monitoring the Status of Children in Foster Care, and Termination of Parental Rights," *Stanford Law Review* 28 (1976): 623–706; Robert H. Mnookin, "Foster Care—in Whose Best Interest?" *Harvard Educational Review* 43 (1973): 599–638; Alan R. Gruber, *Children in Foster Care: Destitute, Neglected, Betrayed* (New York: Human Sciences Press, 1978); David Fanshel, "Status Changes of Children in Foster Care: Final Results of the Columbia University Longitudinal Study," *Child Welfare* 55 (1979): 113–71.

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10 *Rouse*, 373 F.2d 451 (D.C. Cir. 1966); *Wyatt*, 325 F.Supp. 781 (M.D. Ala. 1971), 344 F.Supp. 373 (M.D. Ala. 1972); *O'Connor*, 422 U.S. 563 (1975); Alexander Brooks, *Law, Psychiatry and the Mental Health System* (Boston: Little, Brown & Co., 1974), p. 843.

11 *Luke v. Cameron*, 364 F.2d 657 (D.C. Cir. 1966); Brooks, pp. 727–34, 843.

12 "The basic right of a juvenile is not to liberty, but to custody" (*Ex parte Crouse*, 4 Whart. 9, 11 [Sup. Ct. Pa. 1839]), quoted and elaborated by Laurence Houlgate, *The Child and the State: A Normative Theory of Juvenile Rights* (Baltimore: Johns Hopkins University Press, 1980), pp. viii, 29–30; Pamela Dru Sutton, "The Fundamental Right to Family Integrity and Its Role in New York Foster Care Adjudication," *Brooklyn Law Review* 44 (1977): 63–115, at 110.

13 M. David Gelland, "Authority and Autonomy: The State, the Individual and the Family," *University of Miami Law Review* 33 (1978): 125–72.

14 See Brenda M. Hoggott, *Parents and Children* (London: Sweet & Maxwell, 1977), pp. 5–7; Grace Abbott, *The Child and the State*, 2 vols. (Chicago: University of Chicago Press, 1938), 2: 164.

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Notes on Policy and Practice

Income Transfers and Mother-only Families Eight Countries

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An eight-country study of governmental income transfers affecting incomes of
with young children yields systematic data on the income levels of moth
families and the policies and programs through which they are attained. Co
are ranked by their relative "generosity" to these families and the import
family allowance and advance maintenance payments underscored

Mother-only Families: At Risk of Poverty

Single-parent, female-headed families constituted almost half the
population in the United States in 1980 and more than half (56 p
of all poor families with children.¹ Forty-three percent of all
headed families with children were poor in 1980, and the pro
has grown since then. Single mothers (divorced, separated, wi
never married) with children under age six are especially like
poor; more than 60 percent of these families were poor in
Children living in single-parent families are at particular risk of p
and the numbers of children in such families have doubled si
end of the 1960s (see table 1).

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Table 1

POVERTY STATUS IN 1980 OF U.S. FAMILIES WITH CHILDREN BY TYPE OF FAMILY AND AGE OF CHILDREN (in Millions)

	BELOW POVERTY LEVEL		PERCENT OF ALL POOR FAMILIES
	N	%	
All families with children under 18 (32.8)	4.8	14.7	100.0
Female-headed families with children (6.3)	2.7	42.9	56.3
With children under age 6 (2.4)	1.5	60.6	31.3

SOURCE—U.S. Bureau of the Census, *Current Population Reports*, Ser. P-60, no. 133, "Characteristics of the Population Below the Poverty Level: 1980" (Washington, D.C.: Government Printing Office, 1982).

Mother-only families are at similar risk of poverty in all advanced, industrialized countries, not just in the United States. The European Communities launched a major effort in the late 1970s aimed at assessing the extent of poverty in member countries and the composition and characteristics of the poor. Reporting on poverty in the mid 1970s, the authors stated that the incidence of poverty in most member countries was "above or far above average" for the following household and family types:² households with a female head, one-parent families with more than one child (overwhelmingly female headed), and households with a head who is not in the labor force (aged and non-aged).

Several countries outside the community, including as geographically disparate a group as Australia, Canada, and Sweden, have noted a growth in the number and proportion of families with children that are female headed and the disproportionate risks of poverty these families experience.³

Historically, policies concerning female-headed families were directed at the problems of widows with children. However, the growth in social insurance coverage (survivors insurance) for these families and the increase in benefit levels, coupled with a significant decline in the number of widows with young children in most countries, has left such families a protected though minor group. In contrast, the growth in numbers of separated, divorced, never-married mothers has made these mother-only families a far more significant family type in most advanced, industrialized countries. At the same time, their vulnerability to poverty has remained the same or even increased.

A recent analysis of the economic conditions of U.S. children in 1980, as compared with a decade ago, concluded that although children were slightly better off at the end of the 1970s than at the beginning, this was primarily attributable to: (a) smaller families with fewer children, and fewer numbers to share in family income; and (b) more and higher

transfer payments, in particular, Aid to Families with Dependent Children (AFDC) and food stamps.¹

Income Transfers and Mother-only Families

Given the trend in all industrialized countries toward smaller families, more mother-only families, and a relatively high incidence of poverty among mother-only families, an important question is, What is the role of transfer payments in raising the income of these families in various countries? How effective are the transfer payments received by these families in reducing the income gap between them and, for example, the average two-parent family in which the husband works but his wife is at home? Of particular interest is how the United States compares with other countries in terms of what is done for this vulnerable and growing family type, and which transfers are used by other countries in achieving the outcomes that result.

A Cross-national Study

In order to address these questions for these as well as certain other types of "vulnerable" families (families with unemployed or underemployed heads, large families), with the support of the U.S. Social Security Administration, we launched an eight-country study of statutory (government) income transfers (social insurance, family allowances, public or social assistance, and tax policies) as they affect the income of families with young children. The countries studied were Australia, Canada, France, Federal Republic of Germany (subsequently referred to as Germany), Israel, Sweden, United Kingdom, and the United States. All are relatively similar countries, industrialized and wealthy, but differing on, among other things, the explicitness and extent of their commitment to "family policy."² Because of the size of the United States, and the fact that AFDC eligibility criteria and benefit levels (the major relevant transfer program) are determined by the states rather than by the federal government, two jurisdictions were selected for study in the United States: New York, one of the most generous states, and Pennsylvania, a state closer to the median but still ranking above about two-thirds of the states in maximum AFDC benefit levels.

Our focus was on how various types of families (one and two parent; with no, one, two, or four children), with different types of labor force status (employed, unemployed, not in labor force) and different wages (six levels, ranging from no wage to three times average wage), fared

at the end of a year of receiving earnings, transfers, and after payment of taxes. In addition, we were interested in the types of income transfers used to achieve the results as well as the alternative approaches employed. Fifteen family types were selected for study and standardized as regards marital status, presence in home, number and age of children, work history, and wage as proportion of average wage in each country (see table 2). Only cash transfers (and their equivalents) that are entitlements were included among the transfers examined. Ten programs were identified as comprising the major income-transfer programs in the countries studied (see table 3). Not every program exists in every country. Although not necessarily the case, for purposes of comparison we assumed that all who qualified for a benefit both claimed and received it.

Finally, for purposes of comparative analysis, we used as a baseline for each country the net average production worker's wage (APWW) in that country. The usefulness of this yardstick has been demonstrated by research within the Organization for Economic Cooperation and Development (OECD), an economic alliance of the twenty-four leading Western, industrialized countries and Japan. We compared the end-of-year income (earnings and transfers less income taxes and social security contributions) for each family type in each country to the net APWW in that country. The result is an index number that can be

Table 2

FAMILY TYPES STUDIED

Family	Description
1a*	Sole parent, not in labor force, two children, aged two and seven
1b†	Like 1a, but the court has ordered support payments, the father does not pay
2a*	Sole parent, separated, employed at half APWW, two children
2b*	Same as 2a, but father contributes amount equal to double the amount paid for child allowance for one child, one year
3a	Two parents, one earner at APWW, two children
3b*	Same as 3a, but earner works irregularly at half APWW
4a*	Two parents, one unemployed earner, two children
4b*	Same as 4a, but earner is in a work-training program
4c*	Same as 4a, but earner unemployed thirteen months
5a	Two parents, two earners, one at APWW and the other at half APWW, two children
5b	Same as 5a, but one earns an APWW and the other twice APWW
5c	Same as 5a, but one parent unemployed
6	Two parents, one earner at APWW, four children
7a	A married couple, one earner at APWW, no children
7b	Two parents, two earners, one at APWW, the other at three-quarters APWW, mother home on maternity leave after infant was born
7c	A married couple, the husband unemployed, the wife earning APWW

* The "vulnerable" families

† This family type is dropped from the final analysis because there was no difference in income between 1a and 1b

Table 3

"CORE" INCOME-TRANSFER PROGRAMS, BY COUNTRY

Country	Family (Child) Allowance	Housing Allowance	Social Assistance	Child Support (Government)	Unemployment Insurance	Other Unemployment Benefits	Child Allowance Supplements	Food Stamps	Refundable Tax Credits	Maternity Benefits
1 Sweden	X	X	X	X	X	X ⁷				X
2 Germany	X	X	X	X	X	X ⁷				X
3 U.S.—New York			X		X			X	X	X
4 U.S.—Pennsylvania			X		X			X	X	X
5 France	X	X	X	X	X		X			X
6 Canada	X		X		X					X
7 Australia*	X		X		X					X
8 United Kingdom	X	X	X		X	X ²				X
9 Israel	X		X	X	X					X

NOTE.—In this and all other tables, countries are listed in order of per capita GNP for 1979 beginning with the highest. (The reader will note for 1977-78-79 the closeness and interchangeability of ranks 2-3, on the one hand, and 4-5 on the other. Nor are the differences between 1-2 and 4-5 very large, see table 4.) We here use the generic terms for programs and ignore what are significant distinctions. For example, the British child benefit is not the same as the German child allowance, the Swedish advance maintenance grant is quite different from the Israeli alimony payment, as the text subsequently shows.

*We classify Australia under employment assistance and social assistance even though one could debate just how these income-tested benefits should be regarded.

⁷ Labor market assistance.

² Unemployment assistance.

compared across all fifteen family types in each country and across all countries for each family type. Although the standard is conceptually the same in all the countries, clearly it does not have the same monetary value everywhere, since wages vary, as does the per capita gross national product (GNP). (For country ranks in per capita GNP, see table 4.) However, it does provide a picture of how families fare in relation to a standard measure employed in each country.

The data collection was carried out for the year 1979, by research teams in each participating country, under our direction.⁶

Since our special interest was those family types of particular concern in the social policies of all countries, three of the eight "vulnerable" families among the fifteen families, overall, were single-parent, mother-only families. Although the importance of this family type varies among our countries from Sweden, where about a quarter of all families with children are mother-only families, to Israel, where only 1 percent are, and most of these are widows, this family type is an important social policy target in at least seven of the eight countries (see table 5).

Transfers Available

This family type is entitled to transfers under three circumstances, when the mother is not in the labor force and the family has no income; when the mother is working, but for modest wages; and when the absent father pays some child support. In each case, the family type is the same, only the country in which it resides is different. How does this mother fare, and what contributes to the different economic outcomes?

Separated from her husband, the mother in the families in our study is raising two children, ages two and seven. (These children recur in all our families except the ones in which two adults are alone or the one in which there is only one child, an infant.) The family occupies

Table 4

PARTICIPATING COUNTRIES RANKED BY PER CAPITA GROSS NATIONAL PRODUCT (GNP) 1977-1979

Country	1977		1978		1979	
	Per Capita GNP	Rank	Per Capita GNP	Rank	Per Capita GNP	Rank
Sweden	10,210	1	10,540	1	11,920	1
United States	9,590	2	9,770	3	10,820	3
Germany	9,580	3	10,300	2	11,730	2
Canada	9,180	4	8,670	5	9,650	5
France	8,260	5	8,880	4	9,910	4
Australia	7,990	6	8,060	6	9,100	6
United Kingdom	5,030	7	5,720	7	6,310	7
Israel	3,666	8	3,730	8	1,170	8

SOURCE — World Bank reports

Table 5

FAMILIES WITH CHILDREN, FAMILY STRUCTURE, LABOR FORCE PARTICIPATION RATE OF PARENTS, AND FAMILY SIZE (1979) FOR ALL COUNTRIES STUDIED

Countries	Husband/Wife Families as a % of All Families	Single-Parent Families as a % of All Families	Female-headed Families as a % of All Families	Percent of Sole Mothers in Labor Force (Fami- lies 2a, 2b)	At-Home Mothers as a % of Single- Parent Fami- lies (Family 1a)	Percent of Married Mothers in Labor Force (Families 3a, 3b, 3c)	At-Home Mothers as a % of Hus- band/Wife Families 3 (Families 3 4, 6)	Families with Four or More Chil- dren as a % of All Fami- lies (Family 6)
Sweden	73	27	24.4	86	14*	64	36	2
Germany	89	11	9	63	37†	41	59	4.5
United States	80.5	19.5	17.5	68	32	54	45‡	7.8
France	87(1981)	13(1981)	13.0(1981)	69	31	41	59	10.5
Canada	87.7	12.3	10.6	63	37	58	42	4.6
Australia	87	12.7	10.8	43	57	45	55	7.8
United Kingdom	87.5	12	10.4	49	51	60	40	5.4
Israel	95.7	4.3	4.0	69§	31	37	63	20.6§

SOURCE—Data supplied by country research teams, U.S. data from Bureau of Census and Department of Labor

*Many of these are at school or in training programs

†This includes a significant group of widows (27.8 percent) whose labor force participation rate is only 43 percent in contrast to over 70 percent for all other sole mothers (including our family 1a)

‡In a little less than 1 percent of the husband/wife families neither is in the labor force

§Including non-Jews

typical rental housing for its city, pays average rent, and has no boarders or live-in relatives. (This assumption, too, applies to all our families.) There is no income from any source except government-provided benefits; the family has no liquid assets and no home food production.

The nonworking mother (family 1a and 1b)—We begin with a family in which the mother is not in the labor force. She last worked for two years, full-time, at three-quarters of an average wage up until the time her second child was born; she has not worked since. Although at-home mothers constitute a minority of mother-only families in every country but Australia, where they are 57 percent of such families, and the United Kingdom, where they are only slightly more than half (51 percent), they do constitute a significant proportion (about one-third) in all the other countries but Sweden.

This family, 1a, lives on a very tight income in most countries. A variety of programs ensure it the equivalent or close to the equivalent of an average production worker's net wage (APWW) only in Sweden.⁷ The standard is very low for this family type in all but three countries: Sweden, France, and Germany, the countries with the largest family policy commitments. In the other five countries, the low standards are relatively similar. These families receive the equivalent of about half an APWW through transfer payments. Pennsylvania is the lowest-ranking jurisdiction, providing still less in the way of benefits, and most states in the United States would have even lower generosity scores.

What policy instruments yield these results? The countries in the British social assistance tradition—United States, Canada, United Kingdom, Israel, and perhaps, Australia⁸—still rely very heavily on public assistance for providing the basics to this family type, and they rank lower in generosity than the three countries with explicit family policy commitments. All countries except the United States offer family allowances (or child allowances, child benefits) that are not income tested. France adds a family allowance supplement, income tested at a sufficiently high level to cover over three-quarters of all families with three or more children or one child under age three. The food stamp allotments in the United States play approximately the same role as family allowances in Israel, Germany, and the United Kingdom in the total income picture.

Sweden, the most generous country in relation to this and most other types of families in need, packages four different benefits to provide income to the family that is almost twice that provided in countries using social assistance primarily. Social assistance provides about one-third of family income, and a significant child support program (advance maintenance) constitutes another 30 percent. Also significant is Sweden's major income-tested housing allowance that sup-

plements a universal family allowance and that reached half of all families with children in 1979.

France, the second most generous country to these and most other families, makes even less use of social assistance than does Sweden. It employs a cluster of family allowances, including a major income-tested housing allowance program, which, together with the two types of family allowance (the universal one and the supplement), makes a significant contribution to family income. Its sole-parent allowance, a family allowance that in some ways resembles social assistance in the United States (AFDC particularly), provides over half the family income for this family. However, this benefit is only available for a maximum of one year if the youngest child is age two or older, or if the child is younger, until he or she is three years old. Because the benefit is means-tested and discretionary, it is stigmatized. Relatively few women use it.

In Germany, the mother is still eligible for unemployment insurance (because she has worked within the last three years). This benefit, together with more modest family and housing allowances than in France or Sweden, makes social assistance unnecessary. However, if we compute social assistance benefits for this case, as though there were no unemployment insurance eligibility, its APWW score (60), while lower than the score for unemployment insurance benefit (67.3), still ranks third among the countries.

All benefits relevant here are income tested in Australia, excluding family allowances. It ranks with Israel but above Pennsylvania, near the bottom of the list, in relying on both family allowances (a modest grant) and what is called a Class A Widow's Pension (resembling social assistance elsewhere) to provide support.

Of special interest in Canada are refundable dependent child's tax credits, an annual lump-sum payment from the national government and another from Ontario, which in combination are worth more than the Canadian family allowance.

In each country we analyzed the potential impact of a court support order in instances where the father does not pay (family 1b). While the countries treat the support issue in different ways, the family income is exactly as it was for 1a (see table 6). The reasons for this are as follows: In Sweden, family 1a and family 1b have the same entitlements; the fact that the court orders child support for one family and not for the other makes no difference. In Israel the amount we specified for the court order was less than this mother would receive from social assistance; therefore, she receives assistance, ending up with the same benefit received by family 1a. In Germany, as mentioned earlier, the mother is receiving unemployment insurance—a far more generous benefit than the modest amount ordered by the court. The French advance maintenance program, described below, was not yet

Table 6

A MOTHER AND TWO CHILDREN, NOT WORKING AND WORKING END-OF-YEAR INCOME AS A PERCENT OF AVERAGE PRODUCTION WORKERS WAGE (APWW), NET

COUNTRY	NET INCOME AS PERCENT OF APWW					
	Family 1a	Ranking	Family 1b	Family 2a	Ranking	Net Difference 1a-2a
Sweden	93.8	1	93.8	123.1	1	29.3
Germany	67.3	3	67.3	80.9	7.5	3.6
U.S.—New York	54.9	4	54.9	100.8	2	45.9
U.S.—Pennsylvania	44.0	9	44.0	69.2	9	25.2
France	78.6	2	79.1	87.8	3	9.2
Canada	52.5	5	52.5	75.9	6	23.4
Australia	50.0	7.5	50.0	78.8	5	28.8
United Kingdom	51.7	6	51.7	83.0	4	31.3
Israel	50.0	7.5	50.0	71.5	6	21.5

NOTE.—There is a court support order for family 1b, but the father does not contribute. Mother in family 2a earns half an average wage.

in effect, and none of the other countries had such a program as yet in the year of the study.

The working mother (family 2a)—Two-thirds of the single mothers are in the labor force in six of our eight countries, and far more in Sweden. What happens to the income of a family of this kind if the mother finds work at a salary equal to half an average wage? For most, the improvement in family income is substantial. In New York, earnings make family 2a's income almost 90 percent higher than 1a. The improvement is small in the instance of Germany, because a salary is gained but unemployment insurance (unique for 1a in Germany) is lost. It is modest in France, where the difference between the single-parent allowance, which is lost, and a relatively low wage leaves the family with approximately a 10 percent increase in the index number (or about a 12 percent net income increase) as the result of work. (The lone parent benefit, for 1a, however, is of very limited duration.) The child allowance and housing allowance entitlements continue in both these countries.

There are some shifts in the relative ranking of countries with regard to 2a as compared with 1a, since in several instances income-tested assistance is lost if the mother works but in others it is retained. Social assistance is lost in Sweden, but child allowance, housing allowance, and the advance maintenance allowance (child support) continue unchanged. (As a result, this family ends up with income more than 50 percent higher than the same family in any other country.) The U.S. families continue to receive AFDC and food stamps, both reduced, and the working mother is eligible for the earned income tax credit (EITC). Eligibility continues in Canada for family allowance, assistance,

and tax credits. There is no change at all except for a modest assistance decrease, nor are there basic entitlement changes in France (family allowance, family allowance supplement, housing allowance). But the salary does replace the lone parent allowance and leads to a partial reduction in the housing allowance. Australian eligibility continues for family allowance and the Class A Widow's Pension (really a governmental child support program, income tested), but the salary creates entitlement, too, for a sole-parent tax rebate and thus improves the ultimate income despite the decrease in the widow's pension. Child benefits continue in Britain, but supplementary benefits (the basic income-tested assistance program) are discontinued, however, rent or rate rebates (the British version of a housing allowance) partially replace it (for those who apply and receive them—as is the case everywhere with these supplements). Eligibility for child allowance continues in Israel, but not for social assistance.

The working mother, when the father pays child support (family 2b).—For the third variation on the sole-parent family, 2b, we investigated the effects where the father actually contributes each month a sum equal to twice the monthly child allowance for a first child (or a second child, where a first child is not eligible, or the AFDC budget amount for the child in the United States).

The ratios are of interest (see table 7). The relative generosity ranking as compared with 2a is largely unchanged, and most families are not much better off, if at all; but there are exceptions. France is the major exception. The contribution does not affect eligibility for the family allowance, family income supplement, or housing allowance, family income actually increases. Otherwise, the father's contribution merely

Table 7

A WORKING MOTHER AND TWO CHILDREN WITH AND WITHOUT CHILD SUPPORT, END-OF-YEAR INCOME AS A PERCENT OF AVERAGE PRODUCTION WORKERS WAGE (APWW), NET

COUNTRY	NET INCOME AS A PERCENT OF APWW			
	Family 2a	Ranking	Family 2b	Ranking
Sweden	123.1	1	123.1	1
Germany	70.9	7.5	76.3	7.5
U.S.—New York	100.8	2	100.8	2
U.S.—Pennsylvania	69.2	9	75.3	9
France	87.8	3	103.4	2
Canada	75.9	6	75.5	7.5
Australia	78.8	5	82.1	5
United Kingdom	83.0	4	91.6	4
Israel	71.5	7.5	80.1	6

NOTE.—Each mother earns half an average wage. The separated father contributes to child support in family 2b.

decreases the maintenance allowance in Sweden but changes nothing else, is collected by the agency to meet half the costs of AFDC in New York, eliminates AFDC and food stamps in Pennsylvania, decreases the housing allowance in Germany, wipes out social assistance and worsens the tax situation a bit in Canada, and helps budgets somewhat in Britain and Israel.

The Programs That Matter

Several programs are clearly important to these sole-parent families. Among these are family or child allowances, housing allowances, advance maintenance or child support allowances, social assistance, and, in the United States, food stamps and the earned income tax credit (Canada, too, offers a refundable tax credit). Although space does not permit a detailed discussion of each of these, two are of particular importance to these families. One, family allowance, exists everywhere but in the United States. The second, advance maintenance payments, as discussed below, is receiving increased attention in several countries and is especially important for mother-only families in Sweden. For most such families receiving these benefits, their economic circumstances are far superior to those in the United States dependent largely on public assistance.

Family Allowances (Child Allowances or Child Benefits)

Family allowances are cash benefits or payments made by the government to families with children. They are usually provided as flat-rate benefits with a specific amount paid for each child in the family. In some countries the amounts vary by age, ordinal position, and/or number of children. In contrast to most other public income-transfer payments, family allowances are usually not indexed. They are usually tax free as well as non-income tested. In addition, they are generally awarded until a child completes compulsory schooling or reaches the end of compulsory school age, however, in some cases the benefit can be extended if the child is a full-time student.

These allowances exist as a statutory benefit in sixty-seven countries, including every industrialized country except the United States. Except in Australia, where their value is modest, they constitute between 13 and 27 percent of family income for the nonworking mother (family 1a) and between 10 and 24 percent for the working mother earning a modest wage (family 2a). If we add the value of the housing allowance, where provided, to the family allowance, these transfers together account

for almost half the income of family 1a in France, more than a third in Sweden, and more than a quarter in Germany and the United Kingdom; for the working mothers, they together constitute almost 40 percent in France, more than 25 percent in Sweden, and close to that in the United Kingdom and Germany.

Designed to assist parents in a small way with the economic costs of rearing young children, family allowances obviously play a far more significant role in the income of single-parent, female-headed families—where income tends to be low everywhere—than in the income of two-parent families. Moreover, some countries provide a supplementary grant for the first child in a single-parent family or for low-income families.

Beginning in France in the 1930s, as a wage supplement and a device for averting across-the-board wage increases for all workers and employed subsequently (if unsuccessfully) as a pro-natalist device, family allowances have emerged over the last two decades as an important income supplement for wage earners with family responsibilities. Despite the failure to index these benefits almost everywhere, and despite their erosion by inflation, countries have continued to increase benefit levels regularly. In Israel, where the benefit is fully indexed, it has also been integrated into the income tax system, so that beneficiaries receive either a direct cash transfer (if they have no tax liability) or a tax credit. In France, the family allowance is the foundation of that country's income-transfer system for families with children. Using a combination of universal and income-tested benefits, the French assure their single-parent, nonworking families a standard of living that is surpassed only in Sweden. Yet, even here, the benefit fulfills a transitional function, enabling the mother to be supported while in training and helped to enter or reenter the labor force. The underlying assumption is that this mother will be working, either when her child is age three or within one year after first receipt of the single-parent allowance. (Free, publicly subsidized preschools are available for all children whose parent wish them to attend, from age three on.) Once the benefit ends, or when the mother is working and no longer qualifies on an income basis, the other universal family allowances remain, as they do even if this single mother remarries. The objective is to provide an income for low or modest wage earners and to create a work incentive while protecting the economic well-being of children.

Advance Maintenance Payments

In contrast to family allowances, which are long standing and the most consistently used child benefit in all countries, advance maintenance payments are a relatively new benefit, exist in only a very few countries as yet, and are explicitly designed to provide payment for child support

nomies paid by natural and adoptive parents for support of their children who live in other households) when a parent is absent and fails to provide such payment or when payments are irregular or inadequate. The full Swedish program title is "Advance Payment of Maintenance Allowance."

For some years social (public) assistance has been used in many European countries, as in the United States, in such situations where low-income families were concerned; indeed, this system increasingly assumed a primary role in providing support in these cases. In recent years, however, there has been growing dissatisfaction with social assistance in this role and a conviction that an alternative method of providing financial help should be developed.

Further contributing to a search for an alternative strategy in some countries—Sweden, for example—has been the change that has occurred in the life-styles of most women with children, namely, the large-scale entry of women into the labor force. Increasingly, the issue of child support is no longer viewed as the need to compensate a single-parent family for the loss of the income of the absent parent. Instead, the need is for compensation for the absence of that parent's contribution toward the support of the child. The assumption is that except where very young children are concerned, under about age two or three, women will be working and supporting themselves, but whose earnings may not be adequate to cover the costs of a child as well. Thus, there is need for assured child support.

Growth in the numbers of mother-only families, a changing view of women's roles, and increased concern about the proportion of these families receiving public assistance have led several countries to explore alternative types of income transfers other than social assistance.

Four countries that have moved in this direction, albeit two of them very recently, are Sweden, France, Germany, and Israel.⁹ The French initiated a two-year experiment in 1981, and the German program began in 1980, few details are available from either as yet. The Israeli program is designed as an improvement on social assistance. The assumption is that the woman of a mother-only family with a child under fourteen should not be expected to work, a consistently provided benefit at the poverty level should be available to support mother and child, and a public authority should assume responsibility for collecting support from the absent parent in order to offset public expenditure for the benefit. In contrast, the Swedish policy assumes labor force participation by women (but does not require it), views the benefit as child entitlement, and is designed primarily to assure an adequate level of support for a child. Only secondarily is it expected to compensate for public assumption of the financial burden. Both of these programs differ from U.S. policy development as illustrated by Title IV D of

the Social Security Act, where the primary goal has been to recover money so as to effect a reduction in public expenditure for public assistance. The Swedish program is described briefly below.

Advance maintenance payments in Sweden.—Advance maintenance payments are a tax-free cash benefit equal to 40 percent of the Swedish reference wage—an indexed amount used as the basis for setting all social benefits. Payments can be made by the social insurance office as child support to a single parent for each child up to the age of eighteen. The program was instituted to prevent children from being penalized as a consequence of a parent's inability or failure to pay a maintenance allowance (child support) for his or her child. The program was established in its present form in 1964 and represents the most significant development in the child support field among those countries now exploring alternative ways to provide financial support for children.

The parent, usually the mother, applies for advance maintenance in person, by phone, or by mail to the local social insurance office. (The father is the initiator in 10–15 percent of the cases.) Payment is made to the person responsible for the care of the child regardless of whether paternity has been established, a court order is in effect, or the court-ordered child support is lower than this amount, and regardless of the custodial parents' income or marital status. The custodial parent is required by law to assist in the establishment of paternity, however, and paternity is established in a high percentage of cases. In effect, the benefit level represents a normative standard and is viewed as the equivalent, or a little more, of what one parent would contribute to support a child.

Social insurance offices administer the program. About 38 percent of the costs were offset by collection from the responsible parent in 1979. This is expected to reach 50 percent very soon. The philosophy underlying the program, however, is to provide adequate support for the child, not to impose a penalty or even a difficult burden on low-income fathers no longer living with their wives.

Approximately 27 percent of all Swedish families with children are single-parent families. About 11 percent of all children and 53 percent of those in single-parent families are supported or partially supported by these advance maintenance payments—some 220,000 children. The others are supported through voluntary contributions of the absent parent. (There are 310,128 single-parent families in Sweden, but advance maintenance payments are paid in some two-parent families, too.) Only a very small proportion of children, including children of newly arrived immigrants, are not eligible for this benefit.

Twenty percent of the social assistance recipients in Sweden are single mothers. (Forty-five percent are males, divided evenly between middle-aged alcoholics and unemployed youths or substance abusers. 23 percent are single women, largely young; social assistance accounts

for only 1 percent of social welfare expenditures and benefits 5 percent of the population at most.) Less than 20 percent of single mothers receive assistance. Moreover, when they do, benefits are generally small and are provided for a very brief period to cover a temporary or transitional need, or an emergency. Two-thirds are on assistance for less than three months. Furthermore, despite the substantial increase in the numbers of single-parent families, these women, like all Swedish women, are likely to work, even if only part-time.

Alternative Perspectives on Mother-only Families

The link between single parenthood and poverty has been noted in U.S. Census reports, international statistics, social science research, and the media. Prior efforts at improving the situation of these families by reforming "welfare" in the United States have focused primarily, though unsuccessfully, on the major transfer program benefiting these families—AFDC. Several other countries make far less use of public assistance than we do and provide more consistent, more uniform, and more generous income transfers to some of these families. Others make different assumptions about women's roles and, at least as important, view income supplementation as a major function of income transfers. In this note we have reviewed how three types of single-mother families fare under different types of income-transfer policies, and we have described, albeit briefly, two alternatives that are used in other countries. Given the vulnerability of this family type in all industrialized countries, a search for alternative approaches to protecting their economic well-being will inevitably continue.

Notes

1. U.S. Bureau of the Census, *Current Population Reports*, Ser. P-60, no. 133, "Characteristics of the Population Below the Poverty Level, 1980" (Washington, D.C.: Government Printing Office, 1982).

2. Female-headed families, aged families, and large families (with four or more children) are the family and household types most likely to be poor. In the study cited, poverty is defined as less than half median income in the individual countries (see Commission of the European Communities, *Final Report from the Commission to the Council on the First Programme of Pilot Scheme and Studies to Combat Poverty* [Brussels: Commission of the European Communities, 1981]).

3 In Sweden a royal commission was established in the late 1970s to focus specifically on the needs and problems of this family type. In Australia, the federal government has a research program focused on mother-only families. A special group has been assigned a similar task by the provincial government of Ontario, Canada.

4 See Martha Hill, "Trends in the Economic Situation of U.S. Families and Children 1970-1980," in *The High Cost of Living*, ed. Richard Nelson and Felicity Skidmore (Washington, D.C.: National Academy Press, 1983, in press). It should be noted that between 1980 and 1982 the rate of poverty for children increased.

5 For some discussion of family policy, see Sheila B. Kamerman and Alfred J. Kahn, eds., *Family Policy: Government and Family in Fourteen Countries* (New York: Columbia University Press, 1978), or *Child Care, Family Benefits, and Working Parents* (New York: Columbia University Press, 1981).

6 For a more detailed description of the study design and method, see Alfred J. Kahn and Sheila B. Kamerman, *Income Transfers for Families with Children: An Eight Country Study* (Philadelphia: Temple University Press, 1983, in press), and Sheila B. Kamerman and Alfred J. Kahn, "Income Transfers, Work, and the Economic Well-Being of Families with Children," *International Social Security Review (Geneva)* 35, no. 1 (1982): 345-82.

7 The figure 93.8 under Sweden in table 6 for family 1a signifies a year-end 1979 income of 93.8 percent of the average production worker's net wage.

8 Calling Australia a country in the British tradition is debatable in view of a unique history (see Kahn and Kamerman, *Income Transfers for Families with Children*).

9 For a more extensive discussion of advanced maintenance programs in these countries, see Sheila B. Kamerman and Alfred J. Kahn, "Child Support: Some International Developments," in *Parental Support Obligations*, ed. Judith Cassetty (Lexington, Mass.: Lexington Books, 1983).

Notes on Research

Community-based Evaluation for Criminal Justice Planning

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Program evaluation is presently facing a serious crisis since most of the data that are generated through this process are not utilized. Although political considerations contribute to this problem, many of the methodologies and strategies that are employed are not sensitive to the persons or organizations that are evaluated, and thus much irrelevant information is produced. This article maintains that a community-based evaluation model will remedy this difficulty. Subsequent to outlining the basic theoretical tenets of this type of model, various concrete applications are illustrated.

Currently, a call is coming from all quarters announcing that criminal justice must become increasingly community based if crime is to be successfully reduced. Authors such as Philippe Nonet and Philip Selznick suggest that law must be more "responsive" if it is to be socially efficacious.¹ Richard Quinney simply contends that the law is valid only if it assumes the form of "popular justice."² This style of justice, as Mihailo Marković suggests, is based on the concrete social action or "praxis" of a community.³ Others are saying that "community justice" is the only rational solution to the present crime problem, considering recent budget cuts and funding reallocations.⁴ Accordingly, Dan Lewis argues that a community can reduce crime only if the legal system fosters social solidarity, thereby promoting a collective response to this problem.⁵ Most important, the legal system must not be perceived as the community's adversary, or its populace will become additionally fragmented and more vulnerable to crime. Rather, the legal system

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must reflect the community's "inner morality," or law enforcement will exacerbate an already bad situation by producing increased social stress."

This shift in understanding the rightful locus of the legal or criminal justice system has definite social implications. If criminal justice is to be returned to the community, the social alterations required to accomplish this task must not be viewed as merely procedural. More important, the fundamental source of legitimation underpinning the law must be rethought, so that it embodies the community's sense of justice. The legal system must not be conceived as "rationally legal," as outlined by Max Weber, but must represent the crystallization of a community's moral sentiments. As Chaim Perelman suggests, justice results from a legal system only when formalistic abstractions are substituted for the concrete, socially constituted principles that maintain social order.⁷ The law, therefore, becomes truly reasonable when it emerges from social interaction and simultaneously serves to guide community development. True community justice is substantiated and legitimized by a community's members and no other source.

Singularly important is the idea that community justice is a system or structure of coalesced human action, which does not represent metaphysical constructs. The community and the law are reciprocally related, for the one presupposes the other. If community law is to be properly understood, the citizen action from which it is formed must be recognized, for any other portrayal will depict law abstractly. It is precisely this characteristic of community justice, however, that poses problems for the evaluator. Specifically, community justice evaluators face an issue considered by many to be ancillary to any research project; they must view social action as central to their undertaking. Because community action is at the heart of community justice, the evaluator of community-based programs must take special care to ensure that the methodology used to generate data is sensitive to this action. If this component of community justice is not adequately captured by the evaluator, little or no understanding of that legal system will be promoted. Whereas many evaluators treat social action as having secondary importance when conducting evaluation research, the community-based evaluator does not have this option.

Accordingly, any program of evaluation research that considers itself to be community based must reconceptualize a variety of methodological issues so that social or community action is reflected in the data generated. The remainder of this paper will be devoted to specifying the theoretical/methodological shifts required by community-based evaluation if it is to successfully produce valid and usable information.

The Community as a Base for Research

Before continuing to discuss these reformulations, the general context of community-based research must be outlined in order to reveal some

broad methodological implications. The fundamental axiom of community-based research can be stated as follows: The community cannot be treated as if it is a "universal audience."⁸ This is a standard rhetorical strategy whereby a community is viewed as having characteristics considered universal in nature. The community, subsequently, is approached as if it operates in accordance with rules of logic, linguistic symbols, or moral judgments presumed to be universally adopted. It is precisely because the community expresses human action that it cannot be automatically assumed that traditionally normative action is discoverable in any locale. Communities cannot be subsumed under a single, monistic principle, but instead must be seen as reflecting a plurality of tenets. Before any normative scheme is attributed to a community, the action scheme of its members must be consulted to determine its appropriateness. That which is general to a community emerges from human action, and therefore cannot be attributed to people *sui generis*.

More concretely, most communities share particular demographic, racial, and ethnic characteristics, which become critically important to the community-based researcher. These obtrusive features are not necessarily meaningful in themselves, but may disclose something about the normative structure of a community. These underlying attitudes may not be conspicuously normative, yet their tacitness may shape the general outlook or world view of a community. The community-based researcher must use a community's visible features as a clue to search for the rules that underlie it. This subtle uniformity, nevertheless, cannot be assumed to reflect the standard or Gaussian distribution of population characteristics.⁹ Therefore, it is not possible to assume a standard demographic profile that will correctly describe a community's propensity to act in a particular manner. Nor can researchers base their projections pertaining to community needs on standard methodological procedures, as if they will produce "ball park" approximations.

Most standardized methodologies merely produce crude generalizations. But because the community is traditionally held to be a universal audience, it is believed that all methodological errors will balance out over time. This supposition is correct only if it can be guaranteed that all characteristics are randomly distributed and that the "reality" assumptions made by a particular methodology will therefore generate random errors. In community-based research neither of these are safe assumptions. A community is not necessarily a microcosm of some larger reality having randomly distributed characteristics, and, likewise, the errors produced by the reality assumption of a methodology do not affect all populations equally. Certain reality assumptions may totally distort a particular community's self-image, while in another case minor errors may be produced. The only way a community-based evaluator can reduce methodological error is by fusing reality assumptions, unifying those produced by a methodology with those

operative in a community. In short, it cannot be presumed in community-based research that standard error explanations produce valid data.

Community-based research is keenly aware of the obscuring effect methodological assumptions can have relative to understanding a community. A priori assumptions considered to reflect a community's reality may in fact force upon a group of people an irrelevant world view. In this case, all the standard error corrections available will not result in the data generated reflecting community sentiment. Most attempts to eliminate assumptions usually assume the form of standardization, resulting in a myriad of realities being unknowingly projected onto a community.¹⁰ The community-based researcher wants to advance appropriate assumptions, so as to accurately capture a community's reality, but this is done through a different technique than standardization. This strategy is referred to as self-reflection, and allows a community to be approached as a "concrete universal" instead of an abstract universal audience. Through methodological self-reflection it is believed that the human action that provides a community with its meaning can be uncovered. It is, therefore, self-reflection that is the fundamental principle of community-based research.

Self-Reflection: The Principle Guiding Community-based Research

Through self-reflection community-based research can become responsible to a community's action frame of reference.¹¹ Responsibility in this context refers to the ability to collect valid information because the evaluator is correctly attuned to the reality that is operative in a community. The evaluator using self-reflection does not approach a community haphazardly as a result of placing an inordinate amount of faith in the data-producing capability of standard methodological devices. Self-reflection operates on a different principle than that which underpins this traditional research strategy. Specifically, self-reflection argues that valid data can be generated only when the methodological limits of a particular technique are recognized, and not when it is thought that the applicability of a certain method can be extended indefinitely.¹² Self-reflection exposes the limits of methodology, while standardization conceals them.

Self-reflection takes the following form. The self-reflective evaluator always recognizes that data-collection methods are not inherently neutral—that they advance suppositions about social life that in fact create a reality. These assumptions are not merely procedural, and therefore

cannot be counterbalanced or neutralized by additional maneuvering. They literally create data, and, moreover, can misinform the evaluator about life in a community. For instance, the subtle space and time frames that substantiate most demographic and mathematical forecasting models (used for needs assessments) can seriously distort the data introduced into them, while the constructs that subtend psychological and sociological inventories may totally efface a community's self-image. Therefore, only methods that yield assumptions about a social reality similar to those made by the persons to be evaluated should be employed in community-based research. This awareness is only promoted, however, when the limits of the reality promulgated by a method are recognized, thereby revealing the ability of research strategies to create a world view to which the inhabitants of a community might not subscribe. This type of methodological revelation is the aim of self-reflection.

When self-reflection begins to inform an evaluation project, the attempt is made to fuse the reality that is methodologically created to that presumed to be valid by a community. In order to accomplish this, the evaluative act must be conceptualized anew. It cannot be viewed as mere observation or surveillance, whereby the evaluator is provided an impersonal glimpse at a community. On the contrary, every evaluational act should be considered an invitation to dialogue. Those who participate in such a dialogue, however, recognize that they must suspend their personal biases about the world if mutual understanding is ever to be reached. Evaluation now becomes dialogue, with the evaluator putting aside certain methodological presuppositions in order to reconcile the reality assumptions of the evaluator and the evaluatee. Accordingly, the evaluator can be responsible to the community by basing all research on the categories used by it to define and organize its reality. As should be immediately noted, the theory and strategy of standardization of self-reflection are entirely different relative to capturing the life of a community. And of course, an evaluation is valid only when the fundamental creative dimension of a community's existence is captured; any other data referent would render all research findings speculative.

If program evaluation is to enhance policy decision making, then evaluation research must utilize the logic already used by those to be evaluated, or social planning will pursue an erroneous and possibly damaging course.¹³ Self-reflection enables the logic of a community to be grasped, for its primary aim is to diminish methodological self-concern, so that all methods become transparent and display a community's inner life. Evaluation, accordingly, is no longer conceived to be merely a logistical procedure but, more important, an activity whereby the evaluator literally attempts to take the role of the community and understand it in its own terms. When approached in this manner, the

community is treated as a concrete universal, and not one understood in terms of vague methodological generalizations. True dialogue can be operationalized on such nebulous principles.

Self-Reflection and the Reconceptualization of Some Standard Methodological Premises

In order for a community-based strategy of program evaluation to be implemented, the following methodological issues must be reformulated. As a result of these alterations the inner morality of the community can be understood, so that its standards of conduct can be appreciated and valid information gathered.

1. The object of study must be viewed differently than is traditionally the case. This means, simply, that the community cannot be construed abstractly. Recent research shows it is possible to circumscribe a community accurately if it is conceived to be only a spatial domain of people sharing identical ethnic, racial, or demographic characteristics or an array of individuals having a similar tradition because they inhabit a specific locale.¹⁴ When understood in this manner the inner life of a community is merely inferred from these objective characteristics resulting in it receiving an identity that is thoroughly speculative.

Of course, this method of approaching a community relies heavily on stereotypical conceptions of its citizens.¹⁵ If valid information is to be garnered about a community, the evaluator must tap its "depth of commitment" or, using Herbert Marcuse's term, its "aesthetic dimension."¹⁶ The general implication here is that a community is fundamentally regulated by the norms to which it is committed, that are meaningful to its inhabitants, and that serve to supply it with its self-imposed identity. This identity is not obtrusively objective, however, but is based on value commitments that are only loosely associated with the readily visible features of a community. Nevertheless, the community-based researcher must penetrate these underlying commitments that serve to unite a community if its true nature is to be correctly reflected by evaluation data.

2. As a result of this new understanding of the object of inquiry the traditionally conceived relationship of the evaluator to this phenomenon must be revised. Specifically, the aim of the evaluator should no longer be to become "value free," but instead to initiate a dialogue with the community to be evaluated.¹⁷ When the evaluator claims to be value free, tacitly held assumptions made about social life go unchecked. Accordingly, value freedom is transformed into value c

commitments that serve to shape data. Dialogue, as mentioned earlier, is founded on the transcendence of personal commitments, thus allowing the other's views to be comprehended in their own terms. Accurate knowledge, as portrayed through dialogue, must not merely be clear and precise, but must also reflect its core of human action. The community-based evaluator, accordingly, is not only careful to produce "lean" information, but that which is representative of the community's main of commitment.

3. With this type of epistemological relationship in mind, the community-based evaluator adheres to standards of methodological accuracy different from those traditionally employed. Characteristically, methodological precision is assessed against standards of experimental rigor, statistical refinement, or logistical competence. A set of abstract standards erected to determine whether or not the methodological procedures utilized are operationalized correctly, so high-quality data are produced if the specifications for implementing a certain methodology are adhered to closely, it is believed that valid information will be generated. As Guba and Yvonna Lincoln suggest, however, standards conceived in this way are "a priori" and can only be presumed to be indirectly related to validity.¹⁸ In this sense, methodological refinement does not necessarily guarantee the production of valid and thus useful information.

The locus of these abstract standards is entirely different from that of standards used by the community-based evaluator. That is, community-based standards are not substantiated by a priori principles; they emerge from the action scheme of the persons to be evaluated. A methodology is considered accurate only when it is properly aligned with the norms that guide community behavior. The standards that organize community comportment are considered appropriate for assessing the integrity of a methodology. A community-based evaluator, therefore, is not automatically enamored by logistical precision and methodological rigor, for in themselves they can only ensure that a procedure is internally consistent and not necessarily sensitive to the reality in question. Community sensitivity is the yardstick employed by community-based researchers to guide the selection and implementation of a methodology, in addition to assessing the quality of all data. Methodological rigor is not valued if it cannot be transformed into an index of community sensitivity.

4. Accordingly, the programmatic status of all methods must be altered for community-based evaluation. Research methods can no longer be viewed as data-collection mechanisms that merely capture information as it presents itself. Rather, methodology is acknowledged by the community-based researcher as capable of creating data.¹⁹ Methodology is not treated as if it were separate from human action; it is thought to embody it. All methods, therefore, have to be handled as human action during the research process, since the influence of

human action cannot be eliminated from the research act. Nevertheless, human or methodological action can be harnessed so that its creative capacity does not totally destroy the meaning data have for the members of a community. As mentioned earlier, this is accomplished through the evaluator's use of self-reflective methods.

Traditionally, methods are understood to be autonomous, or categorically divorced from the capriciousness thought to be indicative of human creativity. They are therefore provided a special status in the research act, and are presumed to provide dispassionate insight into the nature of social reality. The community-based researcher does not deny the creativity of methods, but rather contends that they can become self-reflective like any other type of human action and can subsequently aid in understanding the role of the community in its own terms. This certainly represents a dramatic shift in comprehending the standard programmatic status usually allotted to methodology.

5. Each of these reformulations points to a need readily recognized by the community-based researcher. That is, the usual way of conceptualizing social facts must be recast. As a result of the traditional dualism maintained between facts and human action, facts are considered to be objective or obtrusive, and isomorphic with an empirical referent.²⁰ Therefore, it is assumed that perspicuous perception will allow for a proper understanding of facticity to be obtained, for it is thought that meaning is ostensibly related to the visible features of a phenomenon. The community-based researcher, on the other hand, recognizes that empirical referents are facts only when they are imbued with meaning produced by human action. A fact can be understood only when its intended meaning is penetrated, and not merely when its objective silhouette is delimited. Therefore, the community-based evaluator is preoccupied with capturing the meaning particular events have for those who live in the social world.

6. The overall aim of the community-based evaluator is to achieve "communicative competence," and not that which is solely based on technical skills.²¹ When the evaluator is communicatively competent it is possible to capture the meaning of the pragmatic activities that lend order to community life, that underlie its domain of commitment. This type of research competence is not acquired by merely mastering the standard technical skills, but instead by learning to appreciate the constitutive significance of language and human action for shaping community life. Once the researcher has attained this insight by becoming self-reflective, it is possible to develop evaluation tactics designed to facilitate the apprehension of human action that establishes the structure and meaning of social life. Of course, when self-reflection is applied to the logistics of program evaluation, many standard practices must also be reconceptualized.

The Impact of Self-Reflection on Some Standard Evaluation Practices

When program evaluation is based on self-reflection, the aim of many standard methodological tools must be reassessed. An attempt will be made here to illustrate how such a shift in attention might affect the researcher's perception of these devices.

Most program evaluation projects are initiated with an assessment of a community's needs, referred to as the needs assessment. The vast majority of needs assessments nowadays, however, are technological in nature. That is, the needs of a community are calculated through the use of highly standardized technical indicators. These range from demographic characteristics to the quality of housing in a particular area. Their use allows needs assessments to be conducted cheaply, for this type of information is readily obtainable. Nevertheless, when this approach is taken these objective criteria are translated into sources of motivation, and projections are made as to how a community will act when facing these conditions. It is quite a leap of faith, however, to presume to know the needs of a community as a result of merely surveying its so-called objective characteristics. The community-based researcher requires that more insight be gained into the human condition if its needs are to be properly appreciated.

Many evaluators recognize the enormous shortcoming of these technical needs-assessment strategies and propose other supplementary sources of data. Some of these include the key-informant and community-forum methods. When these approaches are used, nevertheless, their users tend to focus on procedures for ensuring that the samples chosen are representative, that everyone has an opportunity to talk, that the information conveyed is classified, and that all sentiments are forwarded to planners.²² Little emphasis is placed on conducting the ethnographic work needed for obtaining a proper understanding of a community. In both strategies the community-based researcher is not interested in logistical proprieties but in learning about the real, existential fabric of a community.

Nowadays it appears that the highest stage of evaluation sought is represented by the use of the experimental design. If it is not possible to operationalize a classic design, then a quasi-experimental one is often used as a substitute. The emphasis in both cases is on methodological form, and not necessarily content. It is presumed that methodological precision will automatically result in producing valid data, and to this end rigor becomes an obsession. The community-based evaluator does not flatly object to the use of this research strategy,

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The Contribution of Stress to Child Abuse

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Despite widespread agreement that stress contributes to child abuse, the exact relationship between the two is indeterminate. Using findings from both child abuse and basic stress research, this paper outlines and critiques three popular yet often implicit models postulating the influence of stress on child abuse: phenomenological, life change, and social. The limited explanatory power of each model is discussed. Measurement and conceptual impediments to a more precise understanding of the relationship between stress and abuse are described, and remedies proposed.

The significance of the relationship between stress and abuse, recognized early and researched heavily, has wide consensus.¹ Although stress apparently contributes to child abuse, the precise connection remains uncertain. Conclusive research is impeded by a breach between child abuse specialists and stress researchers. Child abuse researchers' knowledge of developments in stress research is usually incomplete. Stress investigators, on the other hand, have largely ignored child abuse as an area of inquiry. Although studies of the causes and sequelae of stress mount, findings primarily focus on the etiology and recovery from stress-related mental and physical illness rather than the influence of stress on interpersonal traumas like child abuse.² The identification of consistencies and contradictions in work on abuse and stress may encourage more exacting research, allow for better prediction of abuse and reabuse, and promote more efficacious practice.

To date, researchers have articulated three models of the contribution of stress to child abuse: phenomenological, life change, and social. The following discussion examines and assesses each model and its treatment implications. A concluding section offers guidelines for advances in future stress-child abuse research.

The Phenomenological Model

The phenomenological model, an early formulation of the stress and child abuse relationship, suggests that abusive behavior is unleashed by symbolic or concrete incidents perceived as stressful by adults who are susceptible to abuse from inadequate upbringings.⁴ Precipitating incidents, combining with this learned susceptibility, create the phenomenological sense of loss of control. In order to regain command, the individual takes drastic abusive action. Such precipitating incidents are varied, unexpected, and idiosyncratic—examples include a child rubbing scouring powder into a carpet, a child drinking a sibling infant's bottle, or a child defecating in a laundry basket.⁴

What are the clinical implications of the phenomenological model? Some advise group or individual psychotherapy for parents who respond violently to stress.⁵ Psychotherapy, it is thought, can identify causes of anger and vulnerability to stress. Certainly, many child abuse treatment packages incorporate group or individual psychotherapy. Skills training to cope with stressors is a second clinical treatment the phenomenological model implies. Novaco has adapted stress inoculation to help adults with anger control problems.⁶ Recognizing that unique and surprising events may trigger anger, stress inoculation training teaches individuals to prepare for probable provocations, to confront and minimize the impact of events, to cope with the physiological arousal preceding anger, and to praise themselves for successfully resolving conflict. Novaco identifies this approach as concordant with Lazarus's increasingly accepted analysis that stress results from the interplay of person and environment. The phenomenological model of stress endorses cognitive treatment components like stress inoculation and anger-control training.⁷

Analysis.—Clearly, contemporary stress theory provides partial support for a phenomenological explanation of stress in child abuse. Lazarus's description of the effect of a shoelace snapping illustrates the link between a precipitating incident, stress reduction, and loss of control. "The shoelace might break but a major part of the psychological stress created thereby is the implication that one cannot control one's life, that one is helpless in the face of the most stupid of trivialities, or even worse, that one's own inadequacies have made the obstacle occur in the first place. This is what brings the powerful, pathogenic message that breaks one's morale."⁸ In other words, stress arises when an incident is judged to be personally threatening. Assessing the threat, including risks to self-esteem and physical comfort, occurs after the individual inventories his or her personal resources for coping. When deprived of personal resources by a limiting or degrading childhood, caretakers

may find many events overtaxing. For these people, seemingly idiosyncratic and extraneous events will set the stage for abuse.

Supporting the power of phenomenological experiences, Brim argues that the symbolic incidents that occur throughout the life span—the recognition that one's child may be more lovable than oneself, for example—should be recognized as precipitating incidents on a par with concrete life events.⁹ Rabkin and Streuning, who found a low association between objective events and personal resources, suggest that the phenomenological experience of an event accounts for as much as 90 percent of an individual's stress reaction.¹⁰ As such, coping style and personal constructs best predict the severity of responses to stressors.¹¹

Unfortunately, the phenomenological model is not fully confirmable: reporting biases prevent accurate descriptions of the events immediately preceding child abuse. Because legal and social sanctions discourage accused abusers from revealing related events, reports may present abuse as an unusual reaction to an extraordinary event rather than the product of chronic antagonism. Obviously, some event must be contiguous to child abusing; but proximity alone does not establish a causal relationship. The predictive usefulness of the phenomenological model is limited by its inability to identify unique characteristics of the situation or the abuser. Such constraints as cultural factors, for one, contribute to abuse.¹²

In addition, some research challenges a strict phenomenological explanation of the child abuse and stress relationship. Unusual for its credible and detailed descriptions of abuse antecedents, Weston's report of filicides questions the precipitant incident paradigm.¹³ In fully 95 percent of thirty-five reported filicide cases, the precipitant to abuse was a common caretaking and disciplining interaction (excessive crying, soiling, or feeding difficulty). The similarity among abuse antecedents found by Weston, and others, suggests that stress does not arise from unique or idiosyncratic events, but rather from predictable and repetitive family interactions.¹⁴ In short, the phenomenological model does not account for the uniformity of these abuse antecedents.

The Life Change Model

An alternative explanation of the connection between stress and abuse is offered by Blair Justice and his colleagues.¹⁵ Their life change model posits a series of changes in life situation as contributing to the potential to abuse. They suggest that isolated situational crises allow a person time to mobilize resources and thus circumvent impulsive action. Life

crises (i.e., a series of changes compressed together); on the other hand, lay the groundwork for abuse. Under these circumstances, a single precipitating incident, which is ordinarily an insufficient cause, may trigger abuse following life changes. Distinguishing their theory from the phenomenological and from the social model, Justice and Duncan write: "We have no argument with Kempe and Helfer's contention that a broken washing machine may represent a crisis to a parent with the potential to abuse and can trigger an explosive outburst. Nor do we quarrel with the idea that those who abuse are under pressure . . . It is the life crisis—that prolonged series of changes—that predisposes him to abuse, not the situational disturbance that is simply an appendix to that life course. Similarly, it is not day-to-day economic pressure and stress that frame the context in which abuse occurs. It is the unpredictability of all kinds of changes, most of which have nothing to do with the threat of poverty"¹⁶ Justice and Duncan explain the effect of stress with Selye's physiological model: life change creates shock, countershock, resistance, and ultimate exhaustion, and exhaustion triggers abuse.¹⁷

In their study of life crises and child abuse, Justice and Duncan used the Social Readjustment Rating Scale (SRRS) to measure life change in a matched sample of thirty-five abusing and nonabusing families. They found significantly higher life change unit scores for abusive parents in the year preceding abuse. In fact, the dramatic difference between abusing and nonabusing parents' life change scores led them to report, "We found a distinguishing factor of *change*, rather than of economic or environmental stress" (emphasis added).¹⁸

From the clinical standpoint, the life change model recommends preventive strategies. Thus, services are directed at divorced, widowed, multiple birth, recently unemployed, or otherwise disrupted families. In addition, such events as industrial plant closings or urban disasters present readily identifiable populations. Although the life change model recommends community and professional support for people during difficult life transitions, individual instances of major life change are often difficult to locate and therefore not likely to come to the attention of professionals.

When identification of at-risk populations is possible, it should be done with caution, since major life change affects individuals differently. For example, the life change for recently unemployed fathers leads to high risk of abuse, but the transition to parenthood for adolescents, when socioeconomic status is controlled, does not.¹⁹ Clearly, social workers should not use life event scores from the SRRS, or from less systematic clinical judgments, to make predictions about the correctness of removing or restoring children.

Analysis.—The life change model assumes that physical and psychological stress processes are equivalent. Although research on the

relationship between physical and mental health lends the model validity by association, applying concepts developed in physiological studies to interpersonal phenomena requires a leap of faith. Lazarus and Launier caution stress researchers not to generalize across indicators of stress.²⁰ Further, abusive and nonabusive parents with different levels of life change are known to have similar levels of physical exhaustion.²¹

In addition, the life change model may misattribute the source of stress. Although life change is assumed to cause stress, life change in itself is not arbitrarily assigned to individuals by a benevolent or malevolent universe. Some individuals commonly mishandle interpersonal situations (e.g., criticism from an employer) and create life changes for themselves (e.g., job loss). In other words, whether life changes are causes or symptoms of personal ineffectiveness is unclear (see fig. 1). In fact, one sophisticated, cross-lagged panel study provides evidence that the relationship between social-psychological problems and life events is more closely related to differences in psychological efficacy than to the causal impact of life events.²² Others propose that aversive parent-child interactions and problems in community functioning (that may prompt uncontrolled life change) may both arise from poor social adjustment.²³

Further questions are raised by findings that the life-event scaling technique does not explain nonabusive parents with significant life events. In a prospective study of new mothers, life change scores for the adequate child caring group were lower than scores for the inadequate group.²⁴ Fewer than 25 percent of the mothers with high levels of life change, however, appeared in the inadequate care group. Comparing the high life change, adequate care group with the high life change, inadequate care group indicates that the former have more support from family and friends than the latter, who tend to

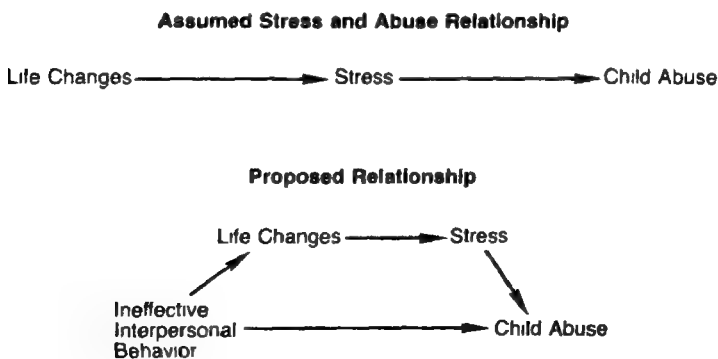


FIG. 1.—Hypothetical chains relating interpersonal behavior, life changes, stress, and child abuse

annoy and alienate friends and family and thereby increase the number of disruptions in their lives. These findings suggest that "life events" contribute, but insignificantly, to the understanding of abuse.

Nevertheless, income may be an intervening variable between life events and abuse. Testing 2,143 families with a modified SRRS, Gelles found that the association between life change and abuse only holds for middle-income families.²⁵ He suggests that upper-class families ameliorate stress with money and that poor families grow accustomed to continual life change.

Interestingly, there is an interaction between life change scores and previous exposure to parent-child violence.²⁶ Abuse rates for persons with high life change scores who were not abused as children were similar to those for low life change counterparts. Only the abuse rates of previously abused parents were elevated with life change increments. The association of life change with abuse is apparently confounded by behavioral origins, socioeconomic context, and previous exposure to violent or conciliatory parents.

Measurement problems, partially attributable to conceptual shortcomings, also discredit the life change paradigm.²⁷ Most events on the schedule can be viewed as symptoms or consequences of problems—or example, sexual difficulties and changes in eating patterns.²⁸ Perhaps the observed relationship between stress and life change indicates that problems have stressful consequences, not that high life change scores lead to problems.

Social Model

The social model provides yet another explanation of the connection between child abuse and stress. Asserting that child abuse is largely a function of the stresses of poverty, the social model rests on accumulating evidence from child abuse researchers that diminished social or ecological resources accompany poverty and increase child maltreatment among the poor.²⁹ Basic stress researchers concur that members of lower socioeconomic groups are exposed to more stressful events than members of higher socioeconomic groups and that the poor are more vulnerable to the impact of those events.³⁰

Associated with the social model are findings that social isolation is manifest in child abuse.³¹ Garbarino hypothesizes that social ecology explains abuse rates better than poverty, although social isolation and poverty both result in diminished resources for coping with stressful events and in exaggerated risk for abuse.³² He elsewhere asserts that

"for a child in a family plagued by stress and parental instability isolation is dangerous and can be lethal."³³

A close look at family interactions shows one possible relationship between social supports, stressors, and abuse. Appraisals of the appropriateness of children's behavior, a critical factor in abuse, are influenced by social supports and stress.³⁴ For example, a parent buoyed by friendship contacts or social rewards is likely to respond patiently to a child's behavior.³⁵ A socially supported adult may evaluate a child's roughhousing or back talking as playful; a socially deprived adult is more likely to be irritable and, therefore, appraise and respond to the situation negatively.³⁶

Interventive possibilities based on the social model range from social networking to broad reforms aimed at eliminating poverty.³⁷ Allocating a wide range of resources and services may reduce socioecologic stress. For instance, Newberger and Newberger advise providing child protection families with such resources as telephones and transportation coupons to alleviate socioeconomic stress.³⁸

Analysis.—As the foregoing discussion intimates, the social model suggests that poverty and deprived social support comprise the link between child abuse and contemporary stress paradigms. When an event threatens personal harm, either psychological or physical, an individual who perceives the event as exceeding his or her personal coping resources experiences stress.³⁹ Thus, while poverty may bring about potential stress situations, such as uncertainty about a child's welfare while the parent is at work, the situations will less commonly be appraised as stressful when the individual knows that options are available (e.g., Head Start). Further, poorer families often lack essential coping resources, including health, energy, morale, problem-solving skills, social networks, money, and services.⁴⁰ Insufficient personal and material resources maximize the impact of stress.

Although it has much to recommend it, the social model has several shortcomings. First, the description of stress is painted in broad strokes and is correlational in nature, allowing for spurious relationships. There may be confounding variation between levels of social support and community makeup. For example, one indicator of the socioecology used by Garbarino is transience.⁴¹ Neighborhood transience may have a relationship to abuse that is independent of social support in that individuals who move about frequently may have aggressive interpersonal styles that create instability. On the contrary, individuals with neighborhood longevity may be members of ethnic groups holding nonviolent child-rearing values. In any case, abuse may be exacerbated or moderated by interpersonal or subcultural factors while being spuriously correlated with stress.

Furthermore, this macro-level model does not account for intrafamily sources of stress and vulnerability to interpersonal conflict.⁴² Family

with different problem-solving capacities, for example, use their resources to handle stressors with more or less economy. Social supports operate within families as well as within communities; hence, families capable of mutual support during high stress periods have reduced risk of abuse.¹³

Research Recommendations

Shortcomings in the phenomenological, life change, and social models of stress in child abuse do not invalidate the independent or combined contributions of these models. Clearly, stress in part arises from personal appraisals, cross-sectional life disruptions, and environmental deprivations. Rather than laboring to verify or dismiss these models, stress research must try to articulate what stressors influence which parents under what conditions.

Fortunately, stress research is coming of age. The overlap, synchrony, incompatibility, and error in current stress and child abuse models are gradually being identified. Interest from epidemiologists, family theorists, social psychologists, sociologists, and physiologists, converging with that of child abuse researchers, has formed a solid basis for maturation.¹⁴ Advances in the measurement and conceptualization of stress and abuse should deepen the understanding of this important interaction.¹⁵

One area demanding more attention is measurement: continued acceptance of the face validity of life stress assessment is not prudent. Investigation of population characteristics should particularly improve life event measurement. Recognizing the need for age-specific measurement, vanHouten and Golembiewski and Gad and Johnson have developed adolescent life events scales to identify common youthful stressors.¹⁶ Egeland et al. bolstered the veracity of their findings by tailoring the life events scale to a lower income, urban population.¹⁷ Holroyd developed an instrument to measure stressors from having a handicapped family member.¹⁸ Although limiting comparability across studies, population-sensitive scales pinpoint within-study associations between child abuse and life change, thereby reducing measurement artifacts and providing a compelling justification for their use.¹⁹ As researchers refine and agree on measures, sensitive and comparable data will emerge.

Researchers also must recognize, apply, and report the multidimensional qualities of stress instruments. Currently used unidimensional life event scores may obscure critical differences in associative strength between particular correlates of stress and child abuse. For example,

down of global life change may show that marital change associates closely with child abuse than employment change. Investigators begun to identify distinct areas of life change—personal, work, al, residence, family, and school—and to isolate stable and significant scale factors.³⁰ Researchers might also evaluate the significance of events with indicators of life stage, attribution of event causality, l organization, recency, impact, and desirability.³¹

Further specification of the stress and child abuse connection will come from other measurement strategies, such as sampling stressful events, taking a prospective approach, and using multimodal assessment. The Family Community Interaction Checklist provides weekly samples of family stressors from contacts with community members.³² For a year, Folkman and Lazarus collected monthly reports of adults' most stressful problem and its impact.³³ In addition, their "Hassles and Uplifts" checklist taps daily events contributing to or ameliorating stress.³⁴ Other researchers are successfully using direct observation to conduct microanalysis of potentially stressful family interactions.³⁵ Using self-reports on the phenomenological impact of the interactions can provide information about intrafamilial stress and more accurately identify the antecedents of abuse. Physiological indices of anger and arousal in abusing adults may highlight effects of precipitating stressors and relaxation.³⁶

The veracity of conclusions will also increase with improved classification of abuse. Failing to distinguish types of child abuse will understandably, but unfortunately, lead investigators to different abusive phenomena to varied conclusions. Thus, following Knutson's division of instrumental and angry or expressive aggression, we can distinguish patterned and precipitous abuse: the former denotes the consistent instrumental use of coercive physical force on children as characterized by repetitive and aversive parent-child interactions escalating aggression; precipitous abuse, on the other hand, seemingly more compatible with stress-based explanations, involves sudden, atypical, expressive force, often preceded by exceptional irritability and accompanied by rage or numbness.³⁷ Precipitous abuse, unusual for an parent, may follow stress-induced tension, heighten a parent's sensitivity to irritability, and conclude with impulsive action. Alternatively, patterned abuse may occur independently of situational crises or changes. Such abuse need not stem from threat or stress or from anger or loss of control, although anxiety and arousal may accompany or follow an attack.³⁸ Stress may be a contributing, but neither necessary nor sufficient, cause of patterned abuse.

In short, researchers and practitioners must acknowledge the complexity of the stress phenomenon. Correlational evidence and three exclusive theories of stress provide guides for continued inquiry. Identification of abuse types, stressors, personal vulnerabilities, and

coping styles will yield a framework for analyzing the range of interpersonal responses that social-ecological conditions may generate when appraised as stressful. Awareness of the implicit stress theory underlying treatment decisions as well as alternative perspectives on child abuse and stress will improve social workers' ability to efficaciously point clients to one or more stress-reducing interventions. Such techniques as stress inoculation training, parent-child problem solving, rational emotive therapy, networking, group therapy, resource enhancement, crisis hotlines, and parent training may be appropriate depending on the sources of stress. Further improvements in stress theory and research promise to provide additional guidance for clinical interventions.

Notes

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Book Reviews

Fringe Benefits: Social Insurance in the Steel Industry. By Lawrence S. Root. Beverly Hills, Calif.: Sage Publications, 1982. Pp. 256. \$20.00 (cloth), \$9.95 (paper).

Writing a book review usually involves addressing a specific audience of potential readers. In the case of Lawrence Root's *Fringe Benefits*, the task of review is complicated by the fact that Root's book addresses two audiences of social workers: those who are counselors in an industrial environment, and those who are policymakers and planners. He does an admirable job of mapping out Inland Steel's benefit program and the common problems raised in that program. All this should aid any social worker headed for an industrial placement in a company or union with an extensive benefit structure. That includes almost all locations hiring social workers for Employee Counseling Programs (ECPs) these days. In his effort to detail the Inland package, however, the author presents too many facts. For example, he informs readers that only two "reimbursements for bite-wing X-rays" are covered every twelve months.

This specificity may try the patience of even an eager industrial social worker recruit, because the details will be different depending on the company or union with which she is involved. It will also test the staying ability of Root's other audience—those concerned with policy and planning issues—for too often the facts are either overdetailed or offered in isolation from what comes before, what follows, or what are the major themes of the book. Nevertheless, the policy analyst should persevere, for Lawrence Root has written an excellent book, rich in information and relevant to many issues of immediate concern. Public and private (occupational) social welfare programs have always existed alongside each other and have, by simple proximity as well as by other more complex forces, shaped each other. Root has for the first time presented a case study of this complementary development.

There are many strengths in this volume. Root has taken a subject too long ignored, compiled a great deal of data, and made some astute observations on trends, future courses, and public policy issues. He analyzes the effectiveness of the benefit structure as an income-replacement system by comparing it to poverty and median income levels. The method is sound and appropriately applied, so that we can understand how the steelworker fares (and, by implication, how other workers experience their systems of fringe benefits). The tables



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are clear and illuminate the discussion. Footnotes and appendices enrich the volume.

However, the book does have some serious faults. Steelworkers are much better off than the average blue-collar employee. Does this limit the generality of the conclusions one can draw from steel industry data? Root does not say. In addition, many findings and conclusions are based on workers' reports, but the reporting workers were neither randomly selected nor systematically interviewed. How seriously should we take reports that "these positive reactions to the employee benefit package *appeared* to be led by praise for the health and dental insurance plans. The extensive protection provided against the costs of health care *seemed* uppermost in respondents' minds . . ." (p. 137) (*italics added*)?

Further, the focus on income maintenance leaves unanswered many of the questions significant to professional practice and planning. For example, Root discusses the new forms of early retirement pension that have increased early retirements. He does not, however, discuss the problems of keeping retirees healthy and happy, problems of which social workers are well aware. Surely these must be exacerbated by early retirement and constitute an arena for attention by industrial social workers. Similarly, he relates factually the problem presented when workers claim a disability and the company argues that they can work. Industrial social workers at ECPs, however, must be aware of this friction point and be prepared to handle the risks involved in client advocacy. Root gives us no guidance on this sticky question.

In fact, the data indicate that a comprehensive fringe system may increase the need for social work intervention even as it changes the context of that intervention. This state of affairs is perhaps most clearly seen in the fact that the majority of coverage problems (i.e., who is covered) that arise are brought by Spanish-speaking workers. A bilingual ECP staff member could provide helpful intervention.

The book is such a rich source of issues that one is hard pressed to select which to discuss. In an era when technological change has disrupted most parts of the economy, one might ask about the impact of fringe benefits on the economy's capacity to adjust to changing conditions. A negative impact could be deduced. Root points out that, over time, "Income protection grows. . . . This increased security renders job changes more costly to the worker" (p. 177). He also mentions that the benefit structure has become an incentive to management to meet the labor needs of excess demand with overtime instead of new hires, for although hourly pay may be high, the company does not increase its fringe benefit responsibilities significantly with overtime. These forces, however, set in motion labor market rigidities that decrease the economy's ability to respond flexibly to changing conditions. A second issue that the book reveals implicitly concerns the difficulties unions face today in maintaining and expanding membership. Steelworkers have experienced high earnings and the protection of an extensive benefit structure. These are clearly a product of union pressure, for as Root correctly concludes, ". . . workers who are least able to bargain effectively for wages are also least able to achieve adequate protection against income loss occasioned by sickness, old age, and death" (p. 187). Yet he also reports that, in interviews, workers see the company as the good guys and reserve their anger for the union—the union under which the outcome of the grievance man's advocacy does not fulfill the member's fantasy. "Today, payment of dues may be the principal reminder of the union's presence . . . and the grievance procedure may result in more resentment than appreciation among rank and file workers."

(p. 47) Such stacked cards bode ill for any reversal in the decline of trade union membership.

This book's relationship to the future is yet another issue worthy of review. *Fringe Benefits* relies on data collected up to 1978. Observing worker satisfaction with the employee benefit program, and in light of workers' attitudes concerning increases in taxes, the author concludes that there is no pressure for improvement of the public system. He notes, "The principal source of insecurity is the possibility of losing one's job, an issue which at least for most Inland workers, was not threatening in the late 1970s" (p. 199). As we view this conclusion in 1982, the ephemeral nature of a world that depends on private rather than public policy is all too apparent.

One wonders how correct Root is in inferring, "In the United States there seems to be little sense of the solidarity needed for mass action" (p. 209), or "in terms of 'felt need' for governmental programs in areas such as health insurance, employee benefits have divided workers in terms of their particular interests. That fragmentation of the electorate complicates any assessment of political support for public programs" (p. 226). If the private benefit structure cannot handle the problems arising in a 10 percent unemployment economy, the financial hardship that knocks on the doors of well-to-do labor union members might well begin a long needed drive for a national income security system such as in advanced industrial countries like Sweden. The professional—industrial social worker or policy planner—would do well to read *Fringe Benefits* in order to be better equipped to understand and take advantage of such an opportunity.

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Policy Options in Long-Term Care. By Judith Meltzer, Frank Farrow, and Harold Richman. Chicago: University of Chicago Press, 1981. Pp. x+244. \$28.00 (cloth), \$12.50 (paper).

The problems associated with care of chronically impaired individuals puzzle policymakers, service providers, and family members as well as the impaired individual. The continuing dissatisfaction with existing systems of care is fueled by projections of increased demand, spiraling spending, and inadequate alternatives. *Policy Options in Long-Term Care* is the report of a conference convened to address the following tasks: developing a consensus on goals and objectives of long-term care policy, determining the nature and extent of public responsibility, guiding the practical and political allocation of scarce resources, and designing a service system or systems.

Fortunately for the reader and the field, this effort goes far beyond the usual publication of conference proceedings. The chapters are authored by recognized experts who not only provide relevant background information and analysis but who also risk suggesting innovative approaches to conceptualizing the difficult choices faced by long-term care policymakers.

The editors of the volume open the discussion in the introductory chapter by providing the following definition for long-term care: "Long-term care represents a range of services that address health, social, and personal care needs of individuals who, for one reason or another, have never developed or have lost some capacity for self care. Services may be continuous or intermittent, but it is generally presumed that they will be delivered for the 'long

term,' that is, indefinitely to individuals who have demonstrated need, usually measured by some index of functional capacity" (p. 2).

It is noted that this definition is inclusive rather than exclusive and covers individuals of varying ages, in a variety of settings, and with differing diagnoses and functional deficits. Elizabeth Kutza, in her chapter on allocation of services, expands on this theme of multiple populations requiring care by discussing difficulties in determining distribution of resources among these groups.

Four recommendations for changes in long-term care policy are made. First, determination of need for care should be based on the presence of functional limitations. Second, age per se should not be a criterion for eligibility for public services. Third, access to services should be equitably distributed among income levels. And finally, the availability of social services should be expanded to provide a more appropriate and cost-effective balance with medical services. These recommendations are based on presentation of existing data as well as careful analysis of conflicting values relevant to long-term care provided in chapter by Robert and Rosalie Kane.

The most controversial chapter is that by William Fullerton in which he examines the problems in finding the money to pay for long-term care services. He examines seven potential sources of funding: payroll financing on a prepaid basis, general revenues, alcohol and tobacco taxation, value added taxes, subsidized personal contributions, tax deductions and credits, and cost sharing. This examination leads to the conclusion that it is unlikely that existing sources of public funds will increase, therefore, private spending should be encouraged and a new source of funding developed. He then proposes that individuals aged forty and over should be allowed to deposit monies into special accounts earmarked for long-term care. Various incentives for participation in this program are suggested, including tax credits and deductions. Monies could be withdrawn from this account as needed to purchase from a mandated set of long-term care services that would also be available to all Medicaid eligibles over seventy-five years of age and all Supplemental Security Income recipients who are eligible on the basis of disability. He concludes with the somewhat whimsical suggestion that additional revenues required for mandated services as well as state and community programs for those needing service would come from a national lottery.

Each of the six chapters is thought provoking and clearly written, making the book important reading for those charged with system-wide planning, fiscal analysis, and policy formulation. It is neither intended nor particularly appropriate for direct-service providers or consumers, but makes an important addition to the libraries of those of us who are involved in efforts to untangle the intricate knots of long-term care policy.

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Effective Social Work Practice: Advanced Techniques for Behavioral Intervention with Individuals, Families, and Institutional Staff. By Elsie M. Linkston, John L. Levitt, Glenn I. Green, Nick L. Linsk, and Tina L. Rzepnicki. San Francisco: Jossey-Bass, Inc., 1982. Pp. xiii + 504. \$22.95.

Linkston and her colleagues have made a significant contribution to the rapidly growing body of literature describing the application of behavioral methods to social work practice. This well-written book describes a pragmatic and efficient approach to assessment, intervention, evaluation, follow-up, and

maintenance of behavior change with individuals and families. The social worker as behavioral analyst, whose task it is to assist staff in institutional settings in the development of behavior change programs, is covered in depth.

The authors set forth a well-reasoned argument for an empirical approach to practice (chap. 1) for which they find firm support in social work values and tradition. In a series of case examples, the possibilities for combining the practitioner/researcher role are demonstrated in a manner that should help to eliminate the artificial dichotomy that is often seen between the two roles.

Two chapters, one on "Selecting and Training Behavior Change Agents" (chap. 5) and one in which procedures for maintenance of behavior change (chap. 9) are described, are especially valuable. These chapters deal with the critical issues that are involved in effecting change in the client's natural environment. Guidance is offered for deciding who to involve in behavior change efforts, how to train behavior change agents, how to maintain the involvement of significant others in change programs, and how to implement procedures to maintain change once formal intervention has ended.

Use of the adjective "advanced" in the title is unfortunate since it may turn away readers who would benefit from the material in this book. Supplementary readings would be necessary for the student wishing a thorough background in social learning theory and principles of behavior. However, behavioral principles are discussed at a basic level, and their application to cases is described in a manner that would be of value to the novice.

In recent years, "ecological" models and "life space" models have received increased attention in the social work practice literature. The authors of *Effective Social Work Practice* do not use either phrase. However, it appears to be understood that behavioral analysis and intervention provide a coherent framework for conceptualization of client problems, for assessment, and for intervention in the variety of domains in which the antecedent and maintaining conditions for client difficulties may be found.

A conceptual framework for behavioral analysis is presented in the first five chapters of the book. This material is repeated, with some variations, in chapters 6 (where intervention with individuals is discussed), chapter 7, in the context of describing intervention methods for working with families, and in chapter 8, where the social worker's role as behavior analyst is covered. The assessment and intervention issues that arise for the practitioner who is working with different client groups and who assumes a different role in helping to bring about change, vary. However, repetition of the material may confuse more than it clarifies. The differences suggested by the contents of these chapters have less to do with substantive topics than with different writing styles and methods of presentation. I would have found it useful if the conceptual framework presented at the beginning of the book had been expanded to include a discussion of the similarities and differences in approach to work with individuals and families and in the assumption of different roles.

A detailed discussion of the problems that practitioners are likely to encounter as they strive to implement research designs in practice settings and suggestions for problem resolution would have been valuable. Readers whose practice does not lend itself to gathering of baseline data and who do not view their clients as likely to provide self-report information may dismiss this work as interesting but not applicable. This would be an unfortunate conclusion but one that is often used to justify an unwillingness to subject one's practice to close scrutiny.

This book is a welcome addition to the literature. The teacher of social work methods as well as the practicing social worker will find this work a

valuable resource and a practical guide to the use of behavioral methods and through the tasks involved in conducting research on practice.

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Ethical Dilemmas in Social Service. By Frederic G. Reamer. New York: Columbia University Press, 1982. Pp. xiii + 280. \$17.50.

Despite the value orientation of social work, little attention has been given to systematic value reflection and ethical analysis. In 1929, L. Jean Elliott, who researched the status of professional ethics in the emerging profession of social work, predicted that there would be few courses on professional responsibility offered by schools of social work. Since only 25 percent of the schools required any type of course in ethics, she concluded that her prediction was supported. Furthermore, she contended that this finding reflected the newness of the profession as the more mature professions included ethical content in their curricula. Interestingly, with the development of the profession, evidenced—as some would hold—by our revised Code of Ethics, and the escalation of courses in professional ethics in related fields as documented in the *Chronicle of Higher Education* (1979), it is estimated that less than 10 percent of our schools provide courses in professional ethics, either elective or required. Scholarly literature is meager, and there is only a beginning recognition in the profession of the need for ethical tools as part of the essential repertoire of coping skills for the social work practitioner. Clearly, then, this work is more than welcome and comes as a considerable contribution to an important area of need in the profession. We are only beginning to see professional social workers enter into serious dialogue on professional ethics. This work not only meets an important need but provides substantive and scholarly material of considerable quality that should contribute to the developing efforts to deal with the complex ethical dilemmas surfacing in our practice situations.

This book is organized around a variety of ethical issues and in the context of actual practice situations. A brief overview of the nature of ethical issues is provided at the outset, followed by core ethical issues in social work. The ethical issues selected for discussion are central to the experience of practitioners and are rarely dealt with systematically in our literature. They range from societal issues (concerns of social ethics), such as allocating scarce resources, to conflicts in micro practice experienced in various organizational settings. Of special significance, these dilemmas are systematically analyzed through the use of ethical discipline. The practice situations are presented comprehensively and concisely, and the ethical methodology is logically explicated in a clear and straightforward manner. The methodology utilized is based on Alan Gerwirth's principle of genetic consistency, which is presented cogently and serves as the framework to analyze and justify ethical positions of the author.

Clearly, the use of Alan Gerwirth's work is useful to social workers and represents efforts to provide comprehensive ethical theories to deal with the complexities and ambiguities of contemporary ethical conflicts where one good competes with another compelling good. Other ethicists seeking comprehensive systems—for example, Richard McCormick of the Kennedy Institute for Bioethics, Georgetown—utilize the principle of proportionality, which seeks to prioritize competing goods in conflict situations. This approach has

contributed significantly to biomedical problems and has much to offer social work

It would have been useful to have had a clearer discussion of professional ethics in relation to normative ethics in general and metaethics. Likewise, a more explicit definition of values and ethical principles would have been helpful, as practitioners with minimal background in philosophy often find their differentiation difficult. The discussion of the deontological and teleological methods of justification could have been amplified to be of more assistance to the practitioner who may not have any background in philosophy or religious ethics.

The limitations in the construction of our Code of Ethics as well as the limitations in the use of the code in dealing with ethical conflicts are clearly demonstrated early in the book. This discussion, however, fails to take into account the purposes and limitations of codes in general and the problems and critiques of codes in other professions. As some authors have suggested, codes, of necessity, are framed in general terms. Principles often contradict one another when applied to individual cases and create conflicting obligations not resolvable in the codes themselves. Hence the need for ethical analysis when dealing with more complex dilemmas.

Although the author clearly differentiates practice issues and ethical issues, it seems important to explicate more clearly their point of interaction and to emphasize that often sound practice precludes an ethical dilemma. For example, a worker who attempts to assure a client early in treatment that personal information will not be revealed may, through overreassurance, give the impression of a promise of absolute confidentiality.

These comments, however, are in no way intended to deflect from this excellent work. It should be useful to those of us who teach courses in ethics, sensitize others to the need for such curricula content, and help practitioners who are experiencing these ethical problems daily. Most important, it should further the dialogue on professional social work ethics and stimulate the building of a scholarly literature so needed in this area.

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The Politics of Welfare: The New York City Experience. By Blanche Bernstein. Cambridge, Mass.: Abt Associates, 1982. Pp. x+220. \$22.00.

When practitioners have the skill and take the time to write about their field, one can expect that something of interest and value will emerge. They may not always be able to state issues in theoretical terms, but they are more likely than their academic counterparts to understand the complexities of implementing programs.

Blanche Bernstein served as commissioner of the Human Resources Administration in New York City from early 1978 through most of 1979. In this position she had jurisdiction over income assistance, social services, and Medicaid programs; she administered an agency with a budget of over \$2 billion and almost 25,000 employees. New York City can be considered one of the "big apples" of welfare, having administered a program of this scale. Commissioner Bernstein is to be taken seriously as a practitioner-turned-author.

There are other reasons why she should be taken seriously. Prior to heading HRA she spent more than twenty years conducting research on the problems of disadvantaged groups, with particular interest in the growth and characteristics

of the New York City population (She is currently director of the Social Policy Research Institute at the New School for Social Research.) She was once deputy commissioner in the New York Department of Social Services for two years, thus experiencing welfare politics at the state as well as the local level.

And, finally, as both researcher and practitioner in the field of welfare administration, Bernstein is a person of courage and persistence. In the middle 1960s she challenged the accuracy of figures issued by city administrators concerning welfare eligibility. More fundamentally, she began asking why caseloads were growing exponentially at a time when migration from the South had virtually ceased and unemployment was low. These are hard questions at any time, and they did little to ingratiate her with advocates, not to mention harassed welfare administrators. Nor were they pleased when—as if to answer her own questions—she pointed out that by the early 1970s welfare benefit levels had become much higher than commonly realized due to the failure to count the value of in-kind programs such as Medicaid, food stamps, and school lunches, in combination with the cash assistance grants more traditionally associated with welfare. Lesser individuals might not have asked these questions as early and as forcefully as she did, nor would they have evinced the same stamina in fighting federal and state bureaucracies. (In a forty-page appendix, she documents a fascinating two-year struggle to gain Department of Health, Education, and Welfare approval for a demonstration project to improve welfare housing. Her efforts failed when Secretary Califano was fired two days before signing the necessary documents, and his successor, Patricia Harris, rejected the project.) Her qualities of spirit, as well as her twenty-year knowledge of the field, make her a practitioner well worth listening to.

How good a book, then, has Bernstein written? One must understand what the author herself wanted to accomplish, and on this she is quite clear. "The general public needs to understand better how welfare programs have developed and how they have gone astray, and what actions can be taken to achieve the humanitarian goals of assisting the poor and vulnerable—goals shared by most Americans. . . . The *via media* is not a very wide road, and yet is rarely crowded. It is my hope that this book will be a marker toward that middle road" (p. 15).

The Politics of Welfare: The New York City Experience provides much useful historical narrative and interpretation. Its value is that it offers a perspective on "What Caused the Welfare Mess?" (chap. 2), and "Where Do We Go from Here?" (chap. 5). The author believes that the general perception of welfare as a "mess" can be explained by focusing on three concerns: the levels of eligibility and overpayments, the level of welfare benefits, both in-kind and cash, across all programs, and attitudes that have emerged about the relation between work and welfare. She makes two sweeping assertions about the "welfare mess" For it is my view that not only legislative policies but in significant measure, the way the system was administered in many urban areas of the country, particularly New York City, for too many years, led to an increase in long-term dependency. I also believe that the 'welfare mess' can be greatly minimized, if not largely eliminated, by appropriate legislative policy and above all, by good administration. . . . (pp. 17, 18). She draws heavily upon her New York experience to support these views. She describes, for example, the steps taken to reduce Aid to Families with Dependent Children eligibility and overpayments in New York City, after first outlining how more permissive attitudes in the late 1960s had caused the caseload to skyrocket. Concerning the level of benefits, Bernstein depicts welfare advocates and administrators (and she thinks that these roles are too often blurred) as refusing to think clearly about the size of the total welfare package. This is due either

to the fact that proponents of higher benefits actually believed their cause was just, or were afraid of losing status as a special interest group. Concerning work requirements, she rehearses the themes voiced by others against workfare and training programs, and in so doing, appears to be taking issue with two groups: those who do not discern the social damage that ensues when large numbers of people become indifferent to work versus welfare, and those who erect false obstacles to the development of welfare programs.

The book also vividly describes the evolution of two other programs. In her discussion of the Child Support Program, titled "Shouldn't Low Income Fathers Support Their Children?" it is the Family Court judges who refuse to cooperate by requiring reasonable support payments. In answering the question, "Why Did We Mess Up the Food Stamp Program for So Long?" (chap. 4), she points to the harmful impact of a farm bloc-welfare advocate axis, running from the Department of Agriculture through the offices of Congressman Richmond (Democrat, New York), which pushed for program access to a degree that made administrative integrity virtually impossible. Finally, she provides the case study of the welfare housing demonstration project that documents the difficulty of getting anything done in a welfare world populated by special interest groups and overlapping layers of bureaucracy.

Bernstein may very well be correct in many of the assertions put forward in *The Politics of Welfare: The New York City Experience*. But ultimately this book is a polemic rather than an analysis. Perhaps she believes she has examined her assumptions elsewhere, or was concerned about appealing to a readership that would have been put off by a more thoughtful approach. But, for whatever reason, she does not take us much beyond the realm of uncritical assertion.

Central to the book, for example, is the argument that the availability of welfare programs, and the way they have been administered, is to a large degree responsible for the growth of single-parent families and pervasive attitudes of dependency. But on this rather critical idea she writes only that "one may quarrel over the question of whether the availability of welfare was in part responsible for this trend" (p. 5). And then a footnote: "One of my studies indicated that in about 20 percent of AFDC cases, the mother chose the welfare option over maintaining or forming an intact family. See Blanche Bernstein and William Meezan, *Impact of Welfare on Family Stability*" (p. 205).

In her assertions about the Child Support Program it would be interesting and ultimately more convincing, to know why the Family Court judges in New York are so recalcitrant, whereas this obstacle has not appeared to the same degree elsewhere. She offers some reasons as to why the Michigan program has been a success, but does not ask the most important question, which is why what appears as a major obstacle in New York is not, in fact, also an issue in Michigan. Other comparisons were also at hand, Massachusetts, for example, has also been notable in child support collections.

One of the book's central themes is that welfare programs, or at least AFDC, can be administered well. But in fact, the error rate in the Food Stamp Program is still too high, and the barriers to an effective child support program in New York City have persisted. Bernstein is correct in stating that AFDC delinquency and overpayments have been brought to almost acceptable levels in New York City and elsewhere (and she deserves substantial credit for this result). But, even here, her point does not reach very far. Why has it been possible to bring AFDC more nearly under control than food stamps? Are the political tensions affecting the latter more intractable than those that shaped AFDC in the mid 1960s, or is a significant period of time required in order to bring stability to any new program as large as either of these? And if this is the case, how valid is it for Bernstein to imply that "the welfare mess" (particularly

surrounding AFDC) could have been avoided if only administrators had been more clearheaded and special interest groups less partisan.

Bernstein does not fully explain how and why she and others were able to reduce the AFDC error rate in New York City. She cites the impact of techniques such as computer matches, face-to-face redeterminations, and periodic mail recertifications. But she does not discuss how she was able to train her staff, develop ways of monitoring their performance, infuse the agency with a sense of the importance of reducing the error rate, and establish the necessary computer systems to achieve this goal.

The fact that she did not choose to address such questions would not be significant if she did not, at the same time, push so hard elsewhere in the book for the establishment of a work-requirements program as part of the welfare system. Indeed, she professes bemusement over the failure of her peers to support such a component in the past.

Workfare, especially in relation to the AFDC program, is hardly a new issue, or one for which there is a lack of experience against which to test one's views. There have been substantial efforts to institute workfare over the past fifteen years, starting with then-governor Reagan's much-publicized attempts in California. More recently, serious efforts have been made in New York City, Massachusetts, and, within the last two years, a major series of demonstration projects in Minnesota. Why does Bernstein not look carefully, or even at all, at these earlier and very substantial programs?

The Work Incentives Program (WIN) that requires women with children over six to participate in job training and to take a job if available has been part of the AFDC program since 1967. It is widely regarded as thus far having been ineffective. Bernstein lists some of the reasons—complex regulations, difficulties mobilizing large bureaucracies to new programs (although in this case welfare agencies have had over ten years), and lack of staff commitment. She does not see any need to ask why results would be different if her recommendations were to be tried. She does mention the Public Works Program (PWP) in New York City, alludes to efforts elsewhere, and concludes that, "What emerges in a review of work programs in New York and in other states which have such programs is that work programs are more expensive on a one-for-one basis than a cash grant program. Not only must some allowance be provided for work expenses, but the costs of administering a work program are substantial, especially when account is taken of supervision, supplies, and materials necessary to perform the work" (p. 49).

At the end of the book, Bernstein reviews new regulations under the Reagan Administration and states that a recent change limiting assets of welfare recipients to \$1,000 will be unadministrable. In telling of the unsuccessful attempt to gain approval for the welfare housing program, she refers to her constant struggles against "the imposition of procedures (by federal and state officials) that would make the project impossible to implement" (p. 182). These are not promising precedents for workfare. In this book, she has chosen to ignore them.

Bernstein is more balanced in a brief but useful discussion of the extent to which the welfare system can be designed and administered so as to reduce dependency. She stresses the need to extend the AFDC-Unemployed Fathers program to all states rather than only the twenty-six where it now exists. Such a measure would promote intact families by allowing eligibility if the primary wage earner is in the home but underemployed or working less than 100 hours a month. She also cites the need for research to seek out the causes of family breakup and for demonstration projects that would test the value of

new approaches. This more measured and deliberate strategy makes sense, and one might ask why it is not equally applicable to the concept of workfare.

Ultimately, *The Politics of Welfare: The New York City Experience* is a contribution to the debate about what welfare policy should be. It is a useful recounting of long and difficult battles over important social policy issues. With the exception of the discussion of family policy, however, we must await Bernstein's next book before learning how soon her goals can be achieved and what steps should be taken to put them into effect.

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The Changing Legal World of Adolescence. By Franklin F. Zimring. New York: Free Press, 1982. Pp. xvi+208. \$14.95.

This book benefits from the lively, witty, and informative approach of the Thomas Cooley Lectures that Zimring gave at the University of Michigan in 1980. However, it is his skill as a teacher that distinguishes this book. By defining his audience as lawyers, parents, professionals, and "kids" who have been puzzled by recent trends that have been labeled "children's liberation" and "the revolution in juvenile justice," the author seeks to present, in "ordinary language using common sense," a foundation for examining emerging legal doctrine affecting adolescents (p. ix).

He directs our attention to the fact that publications of legal scholars as recent as 1978-79 do not contain the term "adolescence" in text or subject matter indices. Instead, lawyers are bound by such terms as minors and adults, juveniles and nonjuveniles, minors who are "mature," "in need of supervision," and "not amenable to treatment." We would add that these "cumbersome, uninformative and restrictive terms" (p. xii) are employed despite the fact that for more than three decades adolescence has been a field of specialization for doctors, psychologists, social workers, and teachers, with thousands of publications stemming from this experience.

Zimring rejects the *Black's Law Dictionary* definition of adolescence—that age that follows puberty and precedes the age of majority—recognizing that although this definition has the virtue of simplicity and certainty, it encourages the notion that the boundary of American adolescence can be legislatively amended. He defines adolescence as a period in itself and as a transition, the period being one of stress and of trial and error, the transition being into adulthood. From this position he examines the rights, responsibilities, and protection of youth. Insofar as he argues for a system, it is for flexibility. He differentiates between rights and responsibilities based on levels of maturity that adolescents may assume.

The legal world of adolescence is for the most part a world of private law made and executed by parents. To the extent that adolescents are subject to restraints on their liberty, the restraints are legislated by parents. Adolescents may contribute to the formulation of regulations, and they are often able to negotiate these regulations to achieve results more to their liking. But parental regulation is effective only so long as adolescents respect parental authority. When parental authority is ineffective or nonexistent, cruel or harsh, it is then that the law may step in. Zimring's goal is to suggest a course for a jurisprudence of adolescence that embodies good parenting.

By describing adolescence as a "learner's permit" to demonstrate a maturing capacity to master adult tasks, the author focuses on the essentially protective

function of adults who parent adolescents, on teachers who educate, and on legislatures and courts with whom they come in contact when behavior takes the adolescent beyond the world of private family law into that of public law. He stresses the deregulation of adolescence in order that we may recognize it for what it is—a process of growth and development through which individuals move at varying rates. And he asks us to examine, from the vantage point of several leading cases, the difficult dilemma of deregulating a population with diverse maturing rates and in need of guidance and protection.

Initially he summarizes the history of the legal regulation of children and youth that prevailed during the first six decades of our century. He cites the development of the juvenile court system, inspired by such early youth advocates as Jane Addams and first initiated in Illinois, as an attempt to provide a legal umbrella for children who were the victims of family breakdown or abuse, or who were involved in behavior defined as delinquent. Such children could be responded to by a compassionate state according to an understanding of their immaturity and of their need for guidance and protection. The juvenile court substituted for the parent, and the authoritarian power vested in the parent was transferred to the court. Inevitably overburdened by unmanageable numbers of children who came before the courts, and increasingly without community support to provide resources essential for guidance and protection, the juvenile court system, particularly in metropolitan areas, was seriously undermined. The rights of children and youth to the protection of due process became a subject of concern and reform. The idealistic vision of one age in responding to the social problems of youth can be rapidly outmoded as changes in societal norms accelerate.

Adolescence is defined by the social pressures specific to the society into which the individual is born. Thus the increasing tempo of change within our own society has been a contributor to the complexities of adolescent development and in aiding children and adolescents to grow toward the responsible management of their lives. Zimring notes the rapid shift of population from rural communities to urban and suburban communities with the task of educating adolescents in high schools in which the enrollment is larger than that of an average small town. The fact that students must travel some distance from their homes to these schools fosters a peer culture in which the dicta of individuals working toward adult competency take on greater weight than the wisdom and experience of parents and other adults responsible for these adolescents. Peer groups offer a sense of belonging and a sense of power to adolescents, who often conceal their anxiety and insecurity under dogmatic and sweeping assertions as they struggle toward maturing standards of conduct, vocational goals, and independent judgment. There have always been woesayers, such as Hesiod in the eighth century who lamented that "when I was a boy, we were taught to be discreet and respectful of elders, but the present youth are exceedingly wise and impatient of restraint." Tension and ambivalence between the generations has characterized every period of civilization, but the process of accommodation has for the most part led to profound responsive changes in which the older generation seeks to encompass in an orderly fashion the need for change. The younger generation gradually matures and is able to join in the effort to address civilization's ever-intensifying burdens and tasks.

Zimring is not a woesayer. He is an informed and compassionate legal scholar who seeks to address the impasses and details that the adolescent may encounter as he attempts to achieve psychological maturity, and the unexpected pitfalls that a concerned society tries to avoid in providing safeguards for that adolescent. Using several recent court decisions drawn from a variety

of jurisdictions, he illuminates with fresh insight the difficulty of achieving permission and restraint, freedom and responsibility in any sense that can be uniformly applied to youth. He highlights the basic issue by using as case material the contradictions and inconsistencies in attempting to legislate a drinking age, an age of majority for child support and voting, the right to purchase contraceptives, curfew ordinances, smoking and driving ages, and a dress code. He argues for a jurisprudence of semiautonomy, or, stated another way, a learner's permit for adulthood. He points out that the presumption of liberty is rebuttable, but that it must be viewed on a case-by-case basis in the context of the adolescent's capacity to use liberty accompanied by responsibility. He emphasizes that the inevitable trial and error must not be addressed punitively but with the goal of strengthening judgment. It is when he advocates the least-harm perspective that we have come full swing from the early 1900s goal to do that which is in the best interest of the child.

Adults then, as now, were concerned with the unquestionable need of adolescents for protection and guidance to enable them safely to achieve maturity in body and mind. But Zimring's suggestion is that less is more, that considering what will do the least harm may in the end provide a basis for the best law. Although he states he is in favor of "muddling through," we read this as advocacy of consideration of the adolescent within the context of his culture, guided by sound jurisprudential standards.

Of particular value to the reader in emphasizing the complexity of the changing legal world of adolescence is the appendix, which Zimring titles "An Introduction to Legal Reasoning." The appendix sets forth most of the text of *Carey v. Population Services International* (431 U.S. 678 [1976]). This decision held unconstitutional a New York statute making it a criminal offense for any person other than a licensed pharmacist to sell or to distribute nonprescription contraceptives to children under sixteen years of age, and for anyone, including licensed pharmacists, to advertise or display contraceptives. In striking down the statute, the Supreme Court was divided seven to two, with three justices adding special concurring opinions and one justice dissenting in a separate opinion. These opinions reflect the widespread divergence in approach and application of constitutional principles to access to contraceptives, varying from Justice Stevens's view that the statute represents government-mandated harm by refusing access to protection against venereal disease or unwanted pregnancy, to Justice Rehnquist's position "that the reaction of the men who valiantly but vainly defended Bunker Hill" can be imagined if they had lived to see "enshrined in the Constitution the right of commercial vendors of contraceptives to peddle them to unmarried minors . . . notwithstanding the considered opinion of the New York Legislature to the contrary" (p. 199).

The major part of the decision concerns the question of invasion of privacy protected by a cluster of constitutional provisions. We cannot take the space here to detail these opinions, but they make required reading for those who work with adolescents. Of great interest to us is the repeated use of the word "decision" with relation to whether or not to have a child. For it is precisely the fact that cognitive judgment is absent even when access to contraceptives is not barred that gives rise for the most part to unwanted pregnancies. And we need not repeat here the well-documented rise in the number of teenage pregnancies to emphasize how difficult and long is the path in learning responsible management of one's body that characterizes the adolescent's progress toward maturity. The concomitant problem of the right to terminate a pregnancy is discussed extensively in the course of the decision.

This book offers a sweeping view of the complex world of adolescent law with insight and understanding. It is a book that all those who work with

adolescents will enjoy reading and find helpful. One problem is that it covers so broad a field perhaps too briefly.

Miriam and
Chia

Integrated Ego Psychology. By Norman A. Polansky. Hawthorne, N.Y.: Atlantic Publishing Co., 1982. Pp. 386. \$20.95 (cloth), \$12.95 (paper).

Norman Polansky presents this updated account of his search for a parsimonious theory of human behavior as a successor to his first book, *Ego Psychology and Communication* (New York: Atherton Press, 1971). Several chapters from the first book are included in toto, others contain new or revised material. Although there is less emphasis on communication than in the first work, practice vignettes are used to illustrate behavioral theory throughout.

Because ego psychology can be understood only within the context of psychoanalytic theory, the author uses the first nine chapters to summarize the work of writers and researchers who have made contributions to the main stream of psychoanalytic theory as well as to ego psychology per se. Also treated are such topics as transactional analysis, learning theory, humanism, and other concepts only loosely related to ego psychology. One suspects that Polansky is less interested in the delineation of a narrowly defined ego psychology than in the practical application of concepts and insights derived from research and clinical experience as well as from psychoanalytic theory.

Thus, in my opinion the author is at his best not in the chapters on psychoanalytic theory but in the second part of the book, labeled in the introduction as "pure Polansky." Here one catches a glimpse of a profound integration of insights drawn from many sources. Polansky's enduring interest in "verbal fluency," as well as in the concept of "duplicitous" communication, is revealed to be an outgrowth of his work with his analyst, the late Hellmuth Kaiser. The chapter on "The Healing Powers of Speech," in which he recounts some of the techniques for facilitating what he terms "verbal accessibility," is a sensitive account of the values of communication. Although the essays on group psychology and psychodrama seem to receive disproportionate space in a work of this kind, they are interesting as well as informative in revealing the range and depth of Polansky's clinical experience. In a final chapter on "Will, Choice and Responsibility," he treats the problem of human autonomy in terms of the views of humanist and existentialist writers as well as those of Hellmuth Kaiser. In all of these discourses, Polansky's synthesis of theory with personal and clinical experience shines through and justifies the title of the book—*Integrated Ego Psychology*.

From the point of view of ego psychology per se, certain omissions are noteworthy. Ego psychology is the branch of psychoanalytic theory concerned with the dynamisms through which the individual more or less autonomously maintains internal equilibrium vis-à-vis changing environmental conditions. Thus even an introduction to the subject should give more attention to the problem of autonomy as explored in the contributions of Hartmann and Rapoport. The chapter on development might have included some reference to (a) the effects of the oedipal struggle on personality structure in general and cognitive structures in particular, and (b) the contribution of latency and adolescent experiences to the development of adaptive functions. One might also have expected more emphasis on the ego components of regression and fixation as observed in symptom formation and/or character structures. In

the section on transference, which is discussed only in terms of its negative and positive aspects, Anna Freud's important distinctions between ego, libidinal and "acting out" transferences might have been mentioned. Finally, more specific criteria for assessing various levels of ego functioning than those provided in the chapter on sources of resiliency might have been desirable. Yet in the preface of the book, the author anticipates and takes care of such exceptions: "Describing ego psychology in a form which will be unexceptionable may well be impossible, yet most of it fits together very well, and mine is offered as a workable version." Certainly as a workable version of ego psychology this book is eminently worthy of a test.

Last but not least, any review of this book would be incomplete without a comment on its style, which is very well suited to the author's purposes of introducing undergraduate and graduate students to Freudian theory, and of helping "colleagues refresh their knowledge of the field." Because each chapter is lightened and brightened with tidbits of information about the various theorists cited, the book is saved from the heaviness that characterizes much of the professional literature. One can almost see and hear the author in the classroom, holding forth in a pithy conversational style, illustrating rather abstract notions with humorous anecdotes from his personal as well as his clinical experience.

Each essay begins—one suspects with undergraduate examination anxiety in mind—with a cheery one-page summary entitled "A Speed Reader's Guide to," followed by the chapter heading, for example, "Symptom and Defense, Basic Freudian Conceptions, Character and Personality" etc. On the summary page, key concepts stand out in bold print warning the reader that they constitute the meat of the chapter. Whether the author's personal integration of ego psychology, developed over a lifetime of practice, teaching, and research, can be passed on to his readers through this ingenious editorial device remains to be seen. Nevertheless, as an erstwhile teacher, I can only admire and envy Polansky's success in providing the syllabus so frequently demanded by the students of the sixties. Insofar as students of the eighties are no less likely to appreciate tangible study outlines and lists than their predecessors, this digest of important clinical theory and research is likely to enjoy a long and healthy life as a textbook. Undoubtedly it will provide serious students of human behavior with stimuli and inspiration to go back to the sources provided in the generous bibliography.

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Income Maintenance and Work Incentives: Towards a Synthesis. By Martha N. Ozawa. New York: Praeger Publishers, 1982. Pp. xvi + 279. \$29.95.

Martha Ozawa's stated goal is to develop "a system of income maintenance that is based on a coherent incentive system so as to preserve the work incentive and yet . . . allow the nation to care and provide adequately for vulnerable groups of individuals" (p. viii). Toward this goal, she provides a useful summary of current income maintenance programs, skillfully reviews the development of measurements of poverty and inequality, examines the distributive impact of income maintenance programs, and relates, through the Nixon and Carter reform efforts, the issue of why welfare is so hard to reform. She then selects for discussion some problems currently facing the social security system. From

there, she proceeds to outline her own position and recommendations for the proper mix of income maintenance programs.

What she proposes is a "double-decker" system for social insurance (a proposal that has been around for many years) to replace the current weighted benefit computation. She would visibly divide social insurance into two components: a first tier to be set at the poverty level, and a second to be essentially an annuity system providing a direct actuarial relationship between contributions and benefits. The flat benefit would be financed from general revenues, while the earnings-related benefits would continue to utilize the payroll tax. She would eliminate the earnings test and dependents benefits for children, while permitting the sharing of earnings credits between spouses until one of the spouses reaches age sixty-two. (If the couple were divorced, each would take half of the combined earnings credits for each year of the marriage.) Assuming a socially adequate minimum for people sixty-five and over, Ozawa would also introduce a program of children's allowances to be used as an antipoverty device. The children's allowance would provide universal coverage at a uniform amount equivalent to the income necessary to support a dependent living in a family at the poverty line. The children's allowance would be taxable, and the personal income tax exemption would be abolished along with dependent's benefits for children under social insurance and public assistance. The financing of the cost would be through the federal income tax. Thus, Ozawa's proposals add up to a demogrant for the aged, disabled, and children. These changes, she asserts, would meet family need without creating work disincentives and without distorting the ranking of income provisions as related to work effort.

Ozawa is concerned about the fact that in social insurance, "massive amounts are redistributed to high wage retired—those with dependent spouses particularly" (p. 176). And again, "throughout the history of social security, intergenerational redistribution of income has been so massive that vertical redistribution through the progressive benefit formula is not strong enough to offset the effect of intergenerational transfers in favor of high earners" (p. 176).

While the target efficiency of any transfer program, that is, the percentage of program benefits paid out to recipients with incomes below the poverty line, is an incomplete indicator of a program's redistributive impact unless the absolute amounts are considered, the fact remains that families with a non-aged female head are helped most by public assistance (see Sheldon Danziger, "Income Redistribution and Social Security: Further Evidence," *Social Service Review* 51 [March 1977]: 179–84). While Ozawa's proposed double-decker would help establish economic independence for women, it does not help the non-aged female head except through the vehicle of children's allowances. (A double-decker system would solve many of the problems that arise from the diverse situations of women without discriminating against women because of marital status. Still, there are other ways to accomplish these ends.) Nor has the work incentive issue ever loomed very large for the aged and the disabled, as can be seen from the relative ease with which Supplemental Security Income was separated out from General Assistance and Aid to Families with Dependent Children.

The issue of work incentives has often been confused with work behavior, and Ozawa does not contribute much clarification on this score. Primarily, the concern with work incentives involves the avoidance of "notch" problems and the avoidance of undue penalties for working, which ties into the important issues of multiple benefits and marginal tax rates. Yet Ozawa herself states that "the recommended system does not deal with various in-kind programs, such as Medicare, Medicaid, Food Stamps, Public Housing Assistance and Day

Care Services . . . if the recommended system is implemented along with all these in-kind transfer programs, many of the problems discussed . . . would remain—implicit cumulative tax rates, caused by multiple reciprocity, work disincentives and inequity" (p. 243) (While the significance of multiple benefits is acknowledged by Ozawa, it does not enter into her proposals. Yet, the cash payment alone is not the critical variable—it has become that to which the cash payment is attached. See Shirley M. Buttrick, "The New Recipients: Or Whatever Happened to Public Welfare?" *Journal of Education for Social Work* 17 [Fall 1981]: 83–89.) She further states that unless job opportunities are plentiful, the incentives incorporated in her system are meaningless and unworkable. Such caveats hardly promise to provide an agenda for the eighties. If anything, it shows that the advocates of universal demogrant have, in reintroducing their original proposals of the sixties, failed to incorporate any of the new developments and lessons learned from the history of welfare reform and the current concern with the social insurance system.

Even the double-decker system poses major policy dilemmas. Many are concerned that, if a double-decker were adopted, eventually the flat benefit would be subject to a means test like Supplemental Security Income. Or, political pressure could cause the reverse—namely, an increase in the amount of the flat benefit and a diminution of the earnings-related benefit. In such a situation, a little ambiguity may be quite desirable.

There is little question that social insurance is due for a change, that increasing payroll taxes is not the way to fund the system, that a national health system (not tied to the payroll tax) is needed, and that any restructuring of the income maintenance system must take account of the changing demographics and the changing state of the economy. Ozawa is to be commended for bringing forth a timely and important book. She has provided an excellent summary and review of the key issues. She excels in her ability to make complex concepts both understandable and readable.

She has been less successful in formulating a coherent framework designed to provide helpful guidance for income maintenance policy—an ambitious goal she set for herself. By espousing recommendations that omit most of the troublesome variables, she has given us proposals that are appealing and seductive in their simplicity. While there are no facile answers, the fact is that useful social policy formulation must align itself with the current and future social realities. The self-styled "Atari" analysts are struggling to do that. Perhaps we need to take our cues from their efforts in forging an agenda for change.

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Child Welfare in Israel. By Eliezer David Jaffe. New York: Praeger Publishers, 1982. Pp. xiii + 319. \$25.95.

Child Welfare in Israel is a study of the origins and development of social services to children and youth in the emerging state of Israel. The history of Israel must be perceived in the context of Jewish history, a history of nearly 2,000 years of exile, during which the major task of Jews was to remain Jews. Social welfare, and particularly family and child welfare in the modern state of Israel, is best understood in light of how family, education, income maintenance and self-help institutions that could support and reinforce Jewish religious life and prevent assimilation and identity loss were shaped by the conditions of exile.

An interesting aspect of this book is the view it gives us of the struggle to forge a new state with new social welfare systems from the diverse cultures, family life-styles, and experiences of exile that have shaped the value bases regulating all relationships between intimates, especially attitudes toward family and children. With respect to the agencies and institutions specifically labeled child welfare, the result remains something of a patchwork of pieces and remnants of former systems rather than a smooth amalgam of the new. The task of assimilating a staggering number of immigrants within a very brief period and under conditions of nearly constant national peril necessitated adapting that which was known from each social welfare pioneer's former environment, with little opportunity to test its fit with the new. As Israel matures as an autonomous political and social system, the effort to evolve a distinctly Israeli system, uncluttered by unsuitable remnants from outside, is becoming a priority of Israeli social workers. Social work education and practice in Israel are strongly influenced by social workers educated in American schools. It is regrettable that the same errors must be repeated in a new state.

The rescue of many thousands of child and youth victims of the holocaust described in the first chapter carries a dramatic force no matter how many times one has heard it. For myself, this is one of the most valuable aspects of the book. It is the excitement of being witness to what can be achieved by a handful of people who dedicate themselves totally to the welfare of others—in this instance, the welfare of a most abused and vulnerable segment of humanity. Even if only Part I of this book is read, one will be rewarded with a renewed faith that much can be accomplished by idealism and dedication, even under the most trying circumstances.

Part II is entitled *Services in Support of Children at Home*, and Part III is *Services to Children Away from Home*. Here the format is like a text in child welfare, with a chapter devoted to each subject area, such as day care, homemaker services, and adoption services. The style is essentially descriptive, leaving comparing and contrasting with one's own experience to the reader. When analytical or interpretive comments are interspersed, a reader lacking extensive knowledge of Israeli conditions might wish he or she had a broader base for understanding the interpretations expressed. This is not to say that Eliezer Jaffe has presented something other than a balanced, objective, and well-researched account. Rather, it is that knowledge of American literature and experience in American child welfare do not fully equip one to understand or interpret the Israeli experience.

An example to illustrate this point is Mr. Jaffe's discussion in successive chapters of Part III of foster home care and institutional placements. Israel is currently engaged in a struggle between the proponents of foster family versus institutional care, reminiscent of the century-long struggle by the missionaries of the foster family care persuasion in this country to empty the orphanages of children. Most readers readily will agree with the author's assertion that institutional placement is overused in Israel, perhaps agreeing too readily because it accords with our own bias. I am not entirely comfortable with an anti-institution bias. Foster family care in this country has come to be perceived as as much a dead end for children as was institutional care a century ago. In the last decade permanency planning has emerged as the new objective, a corrective to unplanned and interminable foster care. Is foster family care destined to win over institutional placement in Israel only to retrace the same course as here?

At no point does the author mention permanency planning as something coming to the Israeli scene or as a movement appropriate but overdue. Is it simply too premature, or is permanency planning so unrelated or inappropriate

as to merit no mention? The author emphasizes in several places the weakness of services to families. However, a sophisticated description of in-home, family-focused social work, the kind of services illustrated by the better family crisis intervention services in this country, is not presented as a feature of Israeli child welfare services. Are we to assume they do not exist? As a preventive for either foster family or institutional placement, are only comprehensive emergency family-focused services in the future for Israel? We would have to conclude they are, even though in many respects Israel's child welfare services seem to be following the course of American developments, at times replicating both the best and the worst of American practices.

Although I was aware of discrimination toward African and Oriental Jews before I read this book, the pervasiveness and severity of prejudice toward Jews of Eastern and Southern origin in Israel came as a surprise. On a more positive note, the great investment of money and national intent in social welfare enterprises in Israel was most encouraging. Exact comparisons are hazardous, but it seems to me that a nation such as Israel that lives in real peril, yet maintains a concern and an investment in social welfare activities, makes a nation living in imagined peril—our own—appear even more penurious and unsocialized.

This is a book rich in information about a new society founded on principles of social concern for its citizens. It is a society that may have the ideological resources necessary to create a genuine welfare state if it were relieved of perpetual national peril and the burden of excessive military expenditure. This vision that emerges of a society truly committed to a social welfare ideology was not an objective of the author; it comes simply from reading of Israel's struggle for a region and a state in which Jewish identity is allowed to flourish. Inseparable from Jewish identity is a value base that promotes implementation of a concern for one's fellow Jews.

In sum, this book provides valuable information with interesting, even exciting, detail. However, its larger message is its most important one: that informed and energetic idealism just might survive, even under conditions of national peril.

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Social Science and Institutional Change. By Robert R. Mayer. New Brunswick, N.J.: Transaction Books, 1982. Pp. vi+202. \$16.95.

The title, *Social Science and Institutional Change*, suggests a vast literature, including broad social change theories such as Marx and the modernization literature, Lenski's stratification theory, the anthropologists' diffusion and assimilation theory, collective behavior and later resource mobilization theories of social movements, organizational change theory, political theory, and so on. One might expect some overarching scheme that explains how all of these fit together.

Mayer has taken a more restrictive approach by limiting himself to the decade between 1966 and 1977 and to six data bases. The six are bibliographical indexes: *Research in Education*, *Sociological Abstracts*, *Abstracted Business Information*, *National Clearing House for Mental Health Information*, *Psychological Abstracts*, and *Poverty and Human Resources Abstracts*. In searching these indexes, key words and phrases, such as "planned institutional change," "reform," "planned social change," "organizational change," "social policy experiments," "administrative

change," and "social science and public policy," were used. Two case studies were selected for illustrative purposes in corrections and two in education. Finally, rather than trying to cover all of even this restricted set of material, Mayer reduces the complexity of the task still further by treating only three broad themes in the institutional change literature: the role of ideology, the role of social structure, and the role of individual change.

Collectively, these restrictions result in the omission of much in social science that is most clearly and interestingly related to the issues of institutional change. Inclusion of an idea in the study depended on its being represented in current work and on the authors' presenting that work in terms of its relevance to institutional change. Mayer made no provision for catching relevancies not already noted in the reference systems.

All of this makes the title seem rather overblown. However, taking the book for the limited effort that it is, we find that Mayer has still produced an interesting work.

I am interested in the kinds of connections with the larger social science literature that Mayer omitted. Of special concern beyond Mayer's self-imposed limits are the collective behavior literature, the synthetic work of Zald (including resource mobilization theory), Piven and Cloward on poor people's movements, Handler on legal approaches to change, and the sociology literature in general, including conflict theory, process theory, social structural theory, and structural functional theory. All of these are interesting not only for their explicit attention to change, but also for their implications for change. Change is a system in motion. Literature that helps us understand the system has implications for change, whether the authors specifically address change or not. Mayer's book is interesting within this larger perspective because of its analysis of the interaction of ideology and social structure. Mayer's discussion includes both the case of an organization trying to produce change within itself and that of an organization trying to produce change in its environment. The discussion revolves around (1) the degree of ideological commitment, (2) hierarchy versus lateral structure within the organization, and (3) hierarchy versus lateral structure between the organization and its environment.

The four case studies do not seem very thoroughly researched or analyzed in terms of Mayer's conceptual scheme, but do give rough illustrations of some of the principles. They might well be further analyzed by students, either from the material provided in the book or by further examination of the literature.

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Parents of Children in Placement: Perspectives and Programs Edited by Paula A. Sinanoglu and Anthony N. Maluccio. New York: Child Welfare League of America, 1981. Pp. xi + 475. \$15.95 (cloth), \$10.95 (paper).

Professionals working in the field of child welfare have long acknowledged the importance of parental involvement at various points of child placement. Generally, however, professional practice has focused more on the child, often to the exclusion of parental involvement. While recent evidence suggests that it is possible to intervene in ways that substantially reduce the risks of removing children from their families, an antifamily bias continues to persist among professionals who determine what is in the best interests of the child. According

to Maluccio, a renewed interest has been developing " . . . in practice with—and in behalf of—parents" (p. 5).

Sinanoglu and Maluccio have carefully assembled a series of articles published during the 1970s as well as several additional works specifically written for this book, all focusing on parents of children in preplacement or placement. This work, which is clearly geared to those involved in service delivery, offers practitioners a survey of concrete program ideas and methods for working with parents within a specific theoretical framework and substantiated by recent research. The integration of these three important areas is a particularly helpful contribution.

To illustrate, some of the programs discussed included a chapter by Genevieve Oxley ("Involuntary Clients' Responses to a Treatment Experience") that focuses on the use of a residential treatment center as a resource for working with parents and involving them in the treatment process. Arthur Mandelbaum ("Parent Child Separation: Its Significance to Parents") describes the importance of recognizing parental feelings before and after placement. The use of contracting and goal setting as methods to enhance parenting skills and to assist parents in reaching decisions about their children is discussed by Stein, Gambrell, and Wiltse ("Foster Care: The Use of Contracts"). The provision of intensive work with families plus other social supports, as illustrated in the Oregon Project, are methods capable of reducing the length of time spent in foster care according to Pike ("Permanent Planning for Foster Children: The Oregon Project"). Our attention is directed to the use of educational programs for parents of children in foster care and the expanded use of self-help groups by Murphy ("A Program for Parents of Children in Foster Family Care"). Both methods are used as vehicles for mobilizing parents' own resources and have been gaining in popularity among practitioners.

While other programs are also discussed as innovative examples of work with parents, the authors make note of the fact that the programs they chose to present all take into consideration, in some way, an ecological model. Practitioners may intervene in ways such as altering interactions between parent and child, removing barriers from the family's environment, and placing emphasis on the parents' need for concrete supportive services. This model, according to Sinanoglu and Maluccio, "recognizes the parents as a significant factor in the ecosystem of the child" (p. 343). Joan Laird ("An Ecological Approach to Child Welfare: Issues of Family Identity and Continuity") describes an ecological approach in child welfare. She emphasizes the importance of such models for practitioners and families in mobilizing and utilizing support networks.

The reports of research add a particularly worthwhile dimension to the book. They highlight the program ideas as well as the theoretical approach. David Fanshel ("Parental Visiting of Children in Foster Care: Key to Discharge?") concludes that visitation of children by their parents is the best indicator of their fate in foster care. Shirley Jenkins ("Separation Experiences of Parents Whose Children Are in Foster Care") examined possible relationships between parental separation feelings and demographic characteristics. Early findings showed that parental expressions of anger, bitterness, and worry were significantly associated with cases where children were discharged from care prior to one year.

The book goes beyond the three areas of innovation, theory, and research. There are also sections on early professional perspectives, sociocultural perspectives, legal issues, the importance of parents for the placed child, and the impact of placement on parents. While many of the articles reprinted in this

book have appeared elsewhere, they are brought together here to illustrate the importance of working with parents of children in placement.

In sum, this book provides an overview of current issues and ideas about working with parents. A practitioner's preference of treatment modality is secondary to the importance of involving parents in the treatment process. In fact, Maluccio points to the importance of viewing the parent as the major client and placement of the child as but one aspect of the total service to the parent. Materials in this book can be especially useful in planning staff development and assessing the degree to which current agency programs involve parents.

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Reviews of Government Reports and Public Documents

Social Workers: Their Role and Tasks. Report of a Working Party set up in October 1980 at the request of the Secretary of State for Social Services, by the National Institute for Social Work under the chairmanship of Peter M Barclay. National Institute for Social Work. London: Bedford Square Press, 1982. Pp. 283. £4.95.

This book promised to arouse controversy in the United Kingdom well before it was published. When visiting there in 1981, I was impressed with the high degree of interest in and the amount of debate that took place about the "Barclay Committee" in professional journals and in the popular press as well.¹ The "Barclay Report," as this book has come to be known in the United Kingdom, is an effort by a prestigious body of professionals and citizens to set a new course for British social work for the next decades. Debate on the report will, no doubt, continue for a long while.

The Report of the Working Party is informative and interesting, it is made even more interesting with the addition of two minority reports, the author of which differ with both the Report of the Working Party and with one another, one minority believes the Working Party has gone too far and the other that it has not gone far enough.

It is not surprising that there were strong differences among the members of the Working Party. Currently, the British Labour Party (L.P.) that spawned the Welfare State is in disarray, pulled on one side by the extreme Left and threatened on the other by the politically moderate Alliance, a coalition of the Social Democratic Party (which was formed in 1981 by disenchanted members of the L.P.) and the Liberal Party. At the same time, social work and the social services were being diminished by budget cuts that occurred when the Conservative government under Margaret Thatcher severely limited the expenditures that local authorities could make for these services.

Thus, the Barclay Committee was working in a tumultuous political context that can be characterized as unsympathetic toward social work and professionalism. In addition, they were allowed little time for their task. Appointed in November 1980, they were asked to complete the job within a year. In the

event, the report was finished in April 1982. Given those pressures and constraints, the report is a surprisingly well-written and coherent document.

The controversial issues appear in the last two chapters of the report and in the minority reports. However, social workers in the United States will find the first eleven chapters of the report rather useful as a reference work. They provide a detailed overview of a substantial part of the social services and social work practice in England and Wales. There are, of course, social workers and social services in probation, education, housing, and other institutional areas with which the Working Party did not attempt to deal, and wisely so, given the limits within which they had to work. Terms are explained, the various settings of practice are described, as are the historical background of the social services and the policy context in which they function. Other topics include analysis of the economic context, a description of the organization and management of the social services, a discussion of relationships of the social services with the voluntary sector and with other public service sectors, and an assessment of the public's views of social work. The Working Party commissioned a Gallup poll to discover the public's views, the first of its kind ever done on social work and the social services. Unfortunately, the report does not give a full account of the surprisingly positive outcome of this poll, which was described in detail in 1981 in *New Society*.²

Some new items are introduced in the report that are interesting but somewhat confusing. A distinction is made between the professional tasks of "social care planning" and "counseling," as well as between "direct" and "indirect" services. "Counseling" appears to be the equivalent of social casework, and "social care planning" refers to the other kinds of tasks social workers carry out on behalf of clients such as referrals, advocacy, and work with social support systems. Robert Pinker, the author of one of the minority reports, believes that the difference is not merely semantic. In his view, "It diminishes the significance of the counselling element in social work by conceptually separating it from the social implications of casework" (p. 238). However, a careful reading of the Working Party's report leaves me unsure about this. It is very likely that these conceptual distinctions were made in order to give emphasis to the essential "social" element of social work and at the same time assure social caseworkers that their functions were not being diminished. If so, the semantics will have to be attended to.

"Direct work" includes both counseling and social care planning, and "indirect work" refers to managerial tasks. Because the charge to the Working Party was focused primarily on field social workers, indirect work is given relatively little attention in the report. This is unfortunate because the problems of social work in the United Kingdom are attributable in large part to the fact that the Local Authority Social Services Departments (LASSDs) are comparatively new. These large and complex organizations came into being in 1971 with the passage of the Local Authority Social Services Act (1970) following publication of the Seebohm Report.³ In the United Kingdom the LASSDs are responsible for provision of comprehensive social services on a universal basis.⁴ They are the major employers of social workers. For this reason, British social workers are identified as the professional corps responsible for a major publicly recognized service, and they are, therefore, more visible to and held more accountable by the public for their work than is true of social workers in the United States. While the roles and tasks of social workers merit attention, it seems to me that such problems as scope of authority, allocations of resources, systems of organizational accountability, interorganizational coordination, management of information, and program evaluation need attending to before new models of practice can be created and put into effect.

Be that as it may, the report has two major recommendations about practice. First, while the Working Party endorses the objectives of a General Social Work (or Social Services) Council, a majority were not ready to recommend its immediate establishment. Creation of such a council would be the British equivalent of a system of licensing and certification that would move far beyond the current Certificate of Qualification that is obtained by completion of a social work course. Second, and more important, the Working Party came out strongly for "community social work." "Community" is defined as "a network or networks, of informal relationships between people connected with each other by kinship, common interests, geographical proximity, friendship, occupation, or the giving and receiving of services—or various combination of these" (p. 199). "Community social work" calls for "flexible decentralize patterns of organization based upon a social care plan which takes full account of informal care, and mobilises voluntary and statutory provision in its support" (p. 198).

The Working Party goes to great pains to present the different views on either side of these two recommendations that are interesting but difficult to summarize in a book review. It will be more useful here, I believe, to refer to Professor Robert Pinker's brilliant and devastating minority report that is a critique of the major recommendations of the Working Party and of the other minority report written by Pat Brown, Professor Roger Hadley, and Keith J. White. (The latter report, entitled "A Case for Neighborhood-based Social Work and Social Services," is an argument for an even more decentralize and participatory system than is recommended by the Working Party.)

Pinker views the Working Party's recommendation against establishment of a General Council on Social Work as a reluctance to tangle with the social work unions on one side and the community activists on the other. He says: "The crucial issue in the future status of social work [is that] if it does not become a profession it will become fully unionized." The move toward full professional status and the introduction of an intermediary in the shape of an independent professional body must constitute a threat to [the 'Trade Unions's'] influence" (p. 257). Pinker's view of the activist perspective on professionalism is equally unequivocal. "The greater part of [social work's] specialised knowledge and skills is focussed on a minority of the public, most of whom are very poor and not very articulate. It therefore goes unchallenged when intellectuals and activists who are largely middle class condemn the elitist nature of professionalism, and debunk the status of 'esoteric' knowledge" (p. 257). Everyone will not agree with Pinker's analysis. There is no clearly identified social workers' union in the United Kingdom. The closest thing to it is the British Association of Social Workers (BASW). Interestingly, BASW and the British Medical Association were the strongest advocates for a council and I have seen no evidence that the community activists mobilized around that issue. Thus, it appears that the Working Party acted in opposition only to strong support for a council rather than in response to forces against it.

Pinker makes his sharpest and most masterful passes at the concept of community social work. However, he seems to be responding as much to the other minority report and to unidentified advocates of the Left as to the Working Party's Report. Nonetheless, his critique points up sharply the crucial issues. They are worth summarizing, and here I paraphrase Pinker (pp. 214-50):

A stubbornly persistent notion of social policy studies is that the concept of "community will resolve our policy dilemmas. However, it is an erroneous idea that this concept can provide a basis for shared values in a complex industrial society. "When our policy

makers reach an intellectual impasse they cover their embarrassment with the figleaf of community."

The Working Party's Report does not deal with the often contradictory meaning of "accountability to clients" and "accountability to local 'communities'." Frequently, the most vulnerable, disadvantaged, and stigmatized clients are at greatest risk in community-run programs because they offend local behavioral expectations and are rejected by their neighbors. This problem is glossed over with the assumption that the community workers' geographical proximity to clients will enhance their effectiveness in dealing with such problems.

Moreover, the capacity of local communities, especially poor ones, to support sustained patterns of informal care may be exaggerated. It should be borne in mind that formal provision of social services developed because the family and other primary groups were often incapable of meeting needs for mutual support. (Recent evidence from research on volunteer activity indicates that suburban and rural areas with stable, affluent, middle-class populations are more likely to benefit from a community social work approach than areas with urban, poor, ethnically mixed populations.)

The potential threat to privacy and civil liberties that inheres in some of the Working Party's proposals for State intrusion into the private world of individuals under the guise of prevention and community work is not insignificant. It constitutes an invitation "to endorse the creation of a proliferation of local databanks based largely on hearsay, gossip and well-meaning but uninvited prying" by "secular welfare evangelicals, who wish to advertise their services in every pub, pulpit, and private residence in the country." The unexpressed and unmet needs that these preventive community-based programs are intended to locate could be better dealt with if social service programs were advertised more effectively.

Pinker winds up his attack on the concept of community social work in a colorful metaphor: "It conjures up the vision of a captainless crew under a patchwork ensign stitched together from remnants of the Red Flag and the Jolly Roger—all with a license and some with a disposition to mutiny—heading in the gusty winds of populist rhetoric, with presumption as their figurehead and inexperience as their compass, straight for the reefs of public incredulity" (p. 262).

It is difficult to sort out the extent to which Pinker is responding to the substance of the Working Party's proposals or to the political and ideological hopes of the activists of the Left who may see community social work as an opportunity to further their ambitions. And it is unfortunate that the Working Party was so rushed in its work. It seems to me that they recommend rather large changes in the organization of the social services and in social work practice with insufficient analysis of the problems they have identified and the different possible alternatives for change and their outcomes. With more time they might have been able to give consideration to many of the questions raised by Pinker.

But the Working Party's conception of community social work merits consideration. The literature and practice of social work in respect to social support networks and informal-care systems are certainly shallow. We know little about the professionals' management of interactions with people in their clients' social environments (e.g., family, friends, other agencies and professionals) in respect to such issues as the professionals' and the agencies' authority and the legal, ethical, and affectional conditions of exchange among the parties involved. There is every reason to use these recommendations as the basis for continuing dialogue and study, as well as for research and experimentation. From that point of view, the report of the Working Party is a significant contribution to the professional literature.

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Notes

1 For example, see Elinor Harbridge, "A Year to Find the Common Threads," *Community Care* (January 1, 1981), p. 1, and Drew Clode, "Whose Finger Is on the NISW Trigger?" *Social Work Today* 12, no. 24 (February 2, 1981) 8-9.

2 Stuart Weir, "What Do People Think about Social Workers," *New Society* 56, no. 964 (May 7, 1981) 216-18.

3 Great Britain, *Report of the Committee on the Local Authority and Allied Personal Social Services* (London: Her Majesty's Stationery Office [Comnd. 3803], 1968).

4 Harry Specht, "British Social Services under Siege: An Essay Review," *Social Service Review* 55, no. 4 (December 1981) 592-601.

5 Ken Judge and Jillian Smith, "Who Volunteers?" mimeographed (Personal Social Services Research Unit discussion paper no. 267, University of Kent at Canterbury, February, 1983).

Brief Notices

Social Work Issues in Health Care. Edited by Rosalind S. Miller and Helen Rehr. Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983. Pp. xii + 291. \$24.95.

This text addresses the basic issues for social work practice in health care through the integration of theoretical and practical considerations. It encompasses the structure and organization of health care settings, health policies and legislation, consumers of services, knowledge base for practice, evaluation, research, and future directions.

Daycare. By Alison Clarke-Stewart. The Developing Child Series. Series editors: Jerome Bruner, Michael Cole, and Barbara Lloyd. Cambridge, Mass.: Harvard University Press, 1982. Pp. 173. \$8.95 (cloth), \$3.95 (paper).

A concise and readable review of daycare research and the practical problems that parents face. Suggestions are made as to how parents can make their own evaluation of daycare facilities.

Community Mental Health and Behavior-Ecology: A Handbook of Theory, Research, and Practice. Edited by Abraham M. Jeger and Robert S. Slotnick. New York: Plenum Press, 1982. Pp. xxix + 510. \$37.50.

A collection of contributions by leading practitioners in behavioral ecology that demonstrate the field in action in community mental health.

The Political Economy of Aging: The State, Private Power, and Social Welfare. By Laura Katz Olson. New York: Columbia University Press, 1982. Pp. xii + 272. \$25.00 (cloth), \$12.50 (paper).

The author discusses how traditional American institutions have fostered the social problem of old age in the United States. She argues that democratic socialism holds the solutions to alleviating problems of the elderly.

Social Research and the Practicing Profession. By Robert K. Merton. Edited and with an introduction by Aaron Rosenblatt and Thomas F. Gieryn. Cambridge, Mass.: Abt Associates, 1982. Pp. xvi + 284. \$20.00.

518 Social Service Review

A collection of ten essays by Robert K. Merton exploring the enduring theme that arise in considering the relationship between social research and social policy

The Puzzling Child: From Recognition to Treatment. Edited by Mary Frank *Journal of Children in Contemporary Society*, vol. 14, no. 4 New York: Haworth Press, 1982. Pp. 109. \$20.00

The articles in this issue focus on the questions that constantly arise in regard to the total assessment and treatment of the "puzzling child." They address the practical application of informal assessment.

The Individual and the Social Self: Unpublished Work of George Herbert Mead. Edited and with an introduction by David L. Miller. Chicago: University of Chicago Press, 1982. Pp. vii + 228. \$12.95

Two sets of class notes from 1914 and 1927 of lectures of George Herbert Mead. They do not duplicate his earlier published works but rather express new points of view.

Primary Health Care: More Than Medicine. Edited by Rosalind S. Miller. Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983. Pp. xiv + 232. \$19.95

Papers presented at the National Interdisciplinary Conference on Primary Health Care held in May 1981 at Harriman, New York. An assessment of primary health care from the perspectives of policymakers, planners, researchers, administrators, and practitioners.

Dictionary of Social Welfare. By Noel and Rita Timms. Boston: Routledge & Kegan Paul, 1982. Pp. vi + 217. \$19.95

The terms of social welfare within the context of recent developments in practice and discussion in the literature. Entries include the meaning or range of meanings of a word and its application in welfare, legislation, and policy.

Psychiatric Patient Rights and Patient Advocacy: Issues and Evidence. Edited by Bernard L. Bloom and Shirley J. Asher. Community Psychology Series, vol. 7. Series editor: Bernard L. Bloom. New York: Human Sciences Press, 1982. Pp. 287. \$29.95.

A review and critical analysis of empirical research studies relating to the controversy over who represents the best interests of psychiatric patients.

The State of the World's Children 1982-83: United Nations Children's Fund. By James P. Grant and Peter Adamson. London: Oxford University Press, 1982. Pp. vi + 131. £2.95.

The third annual report of the work of UNICEF. This report suggests that it is possible to reduce child malnutrition and child deaths through social organization and people's participation as well as new technology.

Reforming Human Services: Change through Participation. By Hans Loch and J. Douglas Grant. Sage Library of Social Research, vol. 142. Beverly Hills, Calif.: Sage Publications, 1982. Pp. 271. \$22.00 (cloth), \$10.95 (paper).

An attempt to show how the principles to humanize programs from industrial literature can be applied to service organizations.

Social Work with Groups in Health Settings. Edited by Abraham Lurie, Gary Rosenberg, and Sidney Pinsky. New York: Neale Watson Academic Publications, 1982. Pp. 121. \$8.95.

The papers in this volume deal with forming, developing, and using groups with patients in inpatient and ambulatory services. They emphasize how psychological and physical illnesses affect the types of groups that can be used to provide services in health settings.

Practice Issues in Social Welfare Administration, Policy, and Planning. Guest editor: Milton M. Lebowitz. *Administration in Social Work*, vol. 4, nos. 2/3. Editor: Simon Slavin. New York: Haworth Press, 1982. Pp. 157. \$30.00 (cloth), \$14.95 (paper).

Each of the chapters in this volume was specially commissioned and represents the most recent thoughts of each author on practice issues that have been a source of controversy in social welfare policy, planning, and administration.

Prevention Strategies for Mental Health. Edited by Eugene Aronowitz. New York: Neale Watson Academic Publications, 1983. Pp. 149. \$9.95.

A selection of papers demonstrating effective mental health prevention strategies with specific populations. The volume is the result of the efforts of the Westchester County Department of Mental Health in New York to improve its methods of intervention on the basis of successes elsewhere.

The Forgotten Children: A Study of the Stability and Continuity of Foster Care. By John T. Pardeck. Washington, D.C.: University Press of America, 1982. Pp. xiv + 102. \$8.25.

A secondary data analysis of 4,000 children in foster care in forty-four states. The study describes child and family characteristics associated with stability of foster home placement.

Improving Protective Services for Older Americans: A National Guide Series. By Helaine Hornby, Willard Callender, Jr., Mary Collins, Freda Bernotavicz,

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and Andrew Coburn. Portland: Center for Research and Advanced Study, University of Southern Maine, 1982. Pp. xi + 460. \$3.50 each; \$24.00 set

Protective services for the elderly is a multidisciplinary field concerned with adults who are in danger of losing their life, liberty, or property without external help. Individual guides in this eight-book series address the roles played by the program administrator, social workers, health care providers, attorneys, families and friends, the community, and the aging network in serving endangered elderly.

Public Mental Health: Perspectives and Prospects. Edited by Morton O. Wagenfeld, Paul V. Lemkau, and Blair Justice. Sage Studies in Community Mental Health, vol. 5. Series editor: Richard H. Price. Beverly Hills, Calif.: Sage Publications, 1982. Pp. 320. \$22.00 (cloth), \$10.95 (paper).

This volume includes a number of papers presented at the observance of the twenty-fifth anniversary of the Mental Health Section of the American Public Health Association, as well as specially commissioned chapters on the past and future of public mental health.

Transcultural Perspectives in the Human Services: Organizational Issues and Trends. By Roosevelt Wright, Jr., Dennis Saleebey, Thomas D. Watts, and Pedro J. Lecca. Springfield, Ill.: Charles C. Thomas, 1983. Pp. xii + 191. \$14.95.

A transcultural look at four areas of the human services and the process of working on behalf of ethnic and racial minorities.

Psychopathology and Adaption in Infancy and Early Childhood: Principles of Clinical Diagnosis and Preventive Intervention. By Stanley I. Greenspan, M.D. Clinical Infant Reports: Series of the National Center for Clinical Infant Programs. Sally Provence, M.D., Editor-in-Chief. New York: International Universities Press, 1982. Pp. xv + 263. \$27.50.

A comprehensive approach to the diagnosis, treatment, and preventive intervention of psychopathology in infants and young children.

Beliefs and Self-Help: Cross-cultural Perspectives and Approaches. Edited by George H. Weber and Lucy M. Cohen. New York: Human Sciences Press, 1982. Pp. 359. \$29.95.

A selection of papers relating cases of self-help to beliefs, ethnicity, and group processes, and reflecting the unique roles that social science practitioners and researchers play in relationship to self-help groups.

Guide to the Records of the Carnegie Council on Children. By Michael Ryan. Chicago: Department of Special Collections, University of Chicago Library, 1982. Pp. v + 42.

A guide to the correspondence, minutes, working papers, book manuscripts, press releases, press clippings, tape recordings, and photographs of the Carnegie Council on Children that was established in 1972 to examine the status and needs of children in America.

The Psychoanalytic Study of the Child. Vol. 37. Edited by Alfred J. Solnit, Ruth S. Eissler, Anna Freud, and Peter B. Neubauer. New Haven, Conn.: Yale University Press, 1982. Pp. vii + 588.

An annual containing papers on psychoanalytic topics of interest to clinicians and developmentalists.

Public Documents

Services to Children in Cuyahoga County: A Report to the Board of County Commissioners, November 1982. By the Task Force on Children's Services. Edward Feighan and Alvin Schorr, co-chairmen. Cleveland, 1982.

The report of a task force appointed in 1981 on the care of children for whom the Cuyahoga County Welfare Department in Ohio is responsible.

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National Service and the Welfare-Warfare State

Morris Janowitz

University of Chicago

The introduction of an all-volunteer military in the United States has raised a number of basic questions. Is the new manpower system producing an effective military force, especially in the combat arms? What is the political and moral basis of a system that relies heavily on members of deprived minorities to be the combat soldiers? This paper reviews the efforts to develop as an alternative a voluntary national service with both military and civilian options.

Despite the title of my paper, I do not intend to focus on the current political struggle in the United States over expenditures for welfare versus national defense. Instead, I am interested in assessing the available research and planning dealing with "national service." I am especially concerned with the potential role of social work in national service. I am convinced that both the armed forces and the welfare state could be improved if the United States developed a program in which the majority of its youth spent between one and two years in military or community service.

Let me state the assumptions I use in my analysis. My position is well known and I think that I have been and remain a realist about international relations. I believe that the current military resources of the United States are adequate. By the mid-1980s, we will have an excessively large military force. Two million active-duty military per-

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sonnel, 1,400,000 in the National Guard and the Reserves, and 1 million civilian employees of the armed forces give us the resources for a viable system of deterrence. This assessment does not overlook the serious problems of the quality of personnel in particular military units, especially those assigned to ground combat units. An allocation of \$258 billion for fiscal year 1983 makes possible a powerful arsenal. I believe it is adequate for effective deterrence and is a meaningful contribution to world order and arms control.

In my model, an adequate force would be about 1,700,000 active-duty personnel, a reduction of about 300,000, and a \$30–\$50 billion reduction in the military budget, especially in nuclear weapons. Such savings would not automatically make available sufficient funds with which social welfare issues facing the United States could be solved. A system of national service would also be required. For one to two years youthful personnel would be available whose enthusiasm and motivation would provide a wide range of labor-intensive work for the institutions of the welfare state.

Is there adequate political support for national service? Though there is currently more political support for national service than in the past, there is still not enough to launch national legislation. However, state and local systems might be effective alternatives. Could this country, with its cultural and professional factionalism, organize an efficient national service system? Frankly, I have my doubts that we could. In particular, I am not certain that the social work profession is prepared to support such an approach. Is it prepared to make the necessary changes to utilize the thousands of young people required for an effective national service? This paper is my effort to overcome my own doubts.

Another concern is the sense of national obligation of citizenship and enlightened patriotism that is required for successful national service. The objectives of national service are not only to make personnel available for military and for civilian programs, but to help citizens understand their obligations to society.

National service is a form of civic education, a way of exposing students to the central and enduring political traditions of the nation. It is a way of imparting essential knowledge about the organization and operation of contemporary governmental institutions, and of strengthening the moral sentiments required for performance as effective citizens. Civic education is the opposite of political indoctrination, which is one-sided and coercive.

Civic Consciousness

National service, if implemented on a large scale, would be a continuation of the U.S. historical tradition of the "citizen soldier." From the American

Revolution to the outbreak of World War II, the relative success of civic education in the United States has resulted from two central efforts. First, a simple and rudimentary civic education has been disseminated via the schools. Second, the American armed forces have continued to a considerable extent to sustain the pattern of the "citizen soldier" that came into being during the American Revolution.

Until the outbreak of World War II, primary and secondary schools served as agencies of acculturation for the waves of immigrants. Civic education did not seek to develop a model of a uniform American. Rather, it fostered an extensive cultural and political pluralism which, until the years of the Great Depression, served the nation relatively well. I speak of hyphenated Americans as the particular outcome. Of course, wide sectors of particular minority groups remained relatively untouched by the acculturation efforts of the school system.

After World War II, the nation became doubtful that its schools were contributing to civic education. How could this be corrected? Considerable discussion was generated about the need for new forms of civic education. It was claimed that more than "talk" was necessary; "real"-life training in the form of political obligation was needed. To what extent and in what form could national service assist the struggle for more effective civic education? Could national service contribute to a better balance of political rights in juxtaposition to citizen obligations?

The other primary aspect of civic education in American history involved military service. The United States developed a popular military. It is often overlooked that the military format forged in the American Revolution had a relatively enduring impact on U.S. military institutions. The United States is one of very few nation-states to have had a full-scale political revolution which, in the end, strengthened rather than weakened internal democracy. Like public education, the concept of the citizen soldier was a military development that not only served to win wars but played a significant role in institutionalizing democratic practices. Thus it served both military and political ends. American colonists did not create a "mercenary"-type army, which had been the pattern of the European military before the French Revolution. Instead, the forces developed by the colonists to fight the British had a high turnover in personnel, and a clear distinction was made between regulars, that is, career soldiers, and local militia (later the National Guard). These features made the U.S. military more amenable to civilian control.

The school system and the citizen soldier form of military service contributed to a balance between individual rights and civic obligations. Civic education in the past implied that each able-bodied person had a series of military and nonmilitary tasks to perform on behalf of the nation-state. It is for that reason that I stress that the American Revolution was in fact a form of civic education. In the conduct of that war, officers and enlisted personnel learned that sheer destruction of

the "enemy" was less important than winning them over politically to the goals of the Revolution. They developed a strategy that stressed the need for restraining the use of military force. As a consequence the American Revolution not only resulted in a military victory but also helped to establish the principle of the citizen soldier and civilian supremacy. A locally based militia (or National Guard), with a strong sense of localism, was, up to a point, relevant for democratic political institutions. National service would be, in theory, a continuation of these traditions of the citizen soldier.

Although federal dominance over the army gradually increased, the capacity of the local National Guard to persist and even to thrive is indeed striking. Democratic institutions rest to an important degree on political pluralism: federal forces fulfill aspirations for a national state, whereas National Guard units represent local aspirations.

It is my observation that this dual system, even as it began to decline, continued to contribute to patriotism in the United States. Thus, for example, in the current period, cross-national surveys show Americans very much more likely to report patriotic sentiments than are citizens of the other Western industrialized countries. Surveys conducted in the middle and later 1970s contained the question, "What nation in the world do you have the most respect for?" (None was a possible response.) The percentages naming their own countries were: United States, 59; Canada, 35; United Kingdom, 33; France, 26; Italy, 15, and West Germany, 12.¹ Thus even in the post-Vietnam period, patriotism in the United States was stronger than reported by the mass media.

It is clear that wide segments of the American people would like to see stronger patriotic sentiment, and they recognize an implicit need for greater emphasis on civic obligation to balance personal rights. But this balance is not reinforced sufficiently by the contemporary educational system. Americans are skeptical about the ability of the public schools to increase and strengthen civic consciousness.

Civic consciousness implies the persistence of love or attachment to a country. At a minimum, civic consciousness involves a more effective balance between individual rights and benefits, and civic obligations. Thus we are not concerned with naive notions of the reconstruction of patriotism. Instead, we are concerned with realistic notions by which citizens become more aware of their civic obligations. To what extent can national service make a positive contribution?

Civic education becomes a pressing issue when we realize that immigration into the United States is and will continue to be immense. In 1965, the population of the United States was about 193 million. It grew to 219 million by 1979. The extent to which this population growth in the United States is due to immigration is striking. Official records from the sixties and seventies indicate that the population

increase in the United States attributable to immigration was 20 percent. If current estimates include illegal immigration, the population increase due to immigration stands at about 30 percent. In other words, one out of three persons who made up the population growth in recent years in the United States has been an immigrant. Except for years of very high unemployment, this level of immigration appears likely to continue for the next two decades at least. The bulk of immigration also involves non-English speakers. Moreover, today the processes of acculturation have become increasingly complex. In particular, for the broad range of Spanish-speaking immigrants, there is a powerful sense of communal attachment to the home country which operates against their integration into U.S. society.

Military service still contributes to a sense of patriotism, but the content and meaning of that patriotism have become less and less clear. Nevertheless, in the period after 1945, interest and concern about the need for more civic education have grown, although there has been little agreement about the form, shape, content, and locus of efforts to strengthen patriotic attachment.

Since 1945 there has been a growing demand by public leaders for increased efforts in civic education. The Korean War increased these demands, and the Vietnam War produced renewed debate about the strengths and weaknesses of patriotism in the United States. My research has reinforced my belief that a program to increase the amount and scope of civic education as an effort to reinforce patriotism would have little value. Old-fashioned, simpleminded, uncritical patriotism is not relevant to today's interdependent world. Instead, I make use of the term "civic consciousness" to refer to the forms of patriotism relevant to contemporary American society.

In my view, there can be no meaningful reconstruction of patriotism—no solid strengthening of democratic practices and attitudes—without a system of national service. In a democratic society, national service must essentially be based on volunteerism. Democratic states are not particularly effective in civic education. To teach "civics" without encouraging students to explore the basis and scope of their sense of nationalism renders the subject insipid.

Patriotism, and love of one's country, lead to various forms of belief and behavior. Patriotism can result in a level of performance that enhances the moral worth of a nation-state, or in undesired consequences and distorted performance. Patriotism can be a narrow-minded xenophobia or an integral aspect of a broad, responsible civic consciousness. Given the extensive interdependence of the world community, an "update" in the form and content of patriotism is required. As we analyze patriotism, we repeatedly encounter the question as to whether some forms of national service can operate to strengthen democratic practices and attitudes.

Because of legislation and judicial action, much of the difference between being a citizen and a noncitizen is not obvious. As a result, the advantages of citizenship in a democratic polity require repeated emphasis. The very fact that political leaders have encouraged communalism and bilingualism means that classroom instruction in civic education is more difficult.

The United States has a vast educational system which, despite weakness and limitations, produces a youth population with an extensive level of achievement, especially among its numerous college graduates. College- and professional-level education in the United States remains impressive, even if these cultural achievements are not effectively translated into a more sound set of political practices.

It is clear to me that classroom instruction as presently organized is incapable of making students aware that political obligations are an essential aspect of citizenship. Since classroom teaching is insufficient for civic education, the question is whether the particular educational experience of national service with real-life content will strengthen popular understanding of civic obligations. Various types of "national service" are offered as an approach to "teaching" citizens to perform the tasks that are part of civic obligation. Experiences of national service should be designed to improve one's sense of civic obligation.

The Role of National Service in Developing Civic Consciousness

In the early years of the 1980s we have seen an intensification of the debate on the positive and negative consequences of national service. Can one think about national service as an institution with a concern for the nation as a whole? Or are we of necessity forced to think and plan for a fragmented set of specialized agencies? The closer I examine the issues that must be confronted to organize a meaningful national service, the more complex the organizational problems become. I have not abandoned the goal and desirability of some form of national service—a position I have maintained for over thirty-five years. The manpower generated by volunteer national service is essential to achieve the goals of the welfare state. But I have come to believe that the most desirable forms of national service are likely to be different from those currently recommended. We do not now know how to administer a system of national service. In fact, learning to administer national service by a series of experimental programs is very likely to alter its scope, and content.

Although national service includes a military element, of necessity the military and civic components will be separate. I believe that the most effective blueprint for voluntary national service would provide for decentralized units and diverse programs

The idea of national service is long-standing. The seminal discussion of national service was presented by William James in his essay, "The Moral Equivalent of War."² Regardless of the motives of William James, the agitation for national service started as a "liberal" program. James thought of it as a device by which young men from well-situated families would learn civic discipline. In effect, they would be part of a universal draft, and they would work to improve the lot of the poor. At the same time, sons of better-situated families would learn about the realities of the human environment of poverty and social disorganization. James saw the program as a learning device, the consequences of which would improve the lot of the nation as a whole

In the 1930s, partly under the stimulus of Eleanor Roosevelt, national service was seen as an innovative approach to the issues of poverty and social welfare. The Civilian Conservation Corps presented a model of national service. Continuously thereafter, small groups of liberal and, interestingly enough, selected upper-class leaders advocated various forms of national service as a substitute for traditional welfare programs. Early thinking about national service emphasized that an advanced industrial society has many jobs that could be effectively filled by national service personnel. The wage scale would be clearly below the market rates. In 1967, I presented a manpower plan of the numbers and types of jobs to be filled that would be appropriate for national service.³ An important element of national service as developed in the period from 1930 to 1950 was the claim that proposed national service was essential to upgrade the "underclass." It was claimed that conventional welfare and social work approaches demonstrated limited progress.⁴

In the years after 1945, proposals for national service underwent profound transformation. The new emphasis pressed for extensive youth participation to meet both military and civilian needs. Until 1945, the U.S. armed force was organized on a mobilization format. The military was based on a limited "peacetime" cadre, expanded extensively during military hostilities. In the twentieth century, such mobilization was mainly accomplished by national conscription. Despite organizational difficulties, conscription during World Wars I and II, as well as in the Korean conflict, was broadly acceptable to civilian society.

However, the introduction of nuclear weapons after 1945 changed the manpower requirements for U.S. forces. The draft was destined to be eliminated. While the armed forces retained a capacity for offensive operations, the central function of the "new military" shifted more

and more to deterrence, especially in the North Atlantic Treaty Organization zones. The basic structure of our forces after 1945 became less and less a mobilization cadre. Instead, the military shifted more to a format of a "force in being." A "force in being" means that the military is prepared to fight because it is "in being" and does not have to be mobilized. A force "in being" consists of trained soldiers who can be immediately deployed. It may be augmented by those reservists who can be deployed in a few hours or a few days.

Introduction of nuclear weapons reduced the need for a cadre that could mobilize millions of military personnel. It increased the proportion of personnel who must master complex military technology. The size of the required military has been subject to continued debate. It is clear, however, that continuation of conscription as part of a "peacetime" deterrent force would produce more personnel than required. As a result, the armed forces and the larger society would be faced with the difficult and, in a sense, impossible task of determining who would serve.

The termination of conscription solved a pressing sociopolitical problem for political leaders—namely, the elimination of tensions and disruptions at numerous colleges and universities, especially at the elite institutions. But for the first ten years, elimination of conscription did not have any great impact on U.S. international military policy. In the years ahead, that is, in the second ten years, one can expect that the military, because of the declining available pool of young men, will find manning the armed forces more difficult.

It is almost pointless to speculate about what impact manpower shortages would have on U.S. military and international policy. One likely result would be the stimulation of pressure for detente and arms control and pursuit of a policy of reducing international tensions. But, alternatively, U.S. military policy, confronted with personnel shortages, could emphasize nuclear weapons and thereby increase international tensions.

Introduction of nuclear weapons and elimination of the draft have had a strange impact on the public's attitude toward military preparation. It is an attitude that weakens realistic administration and effective development of the active duty force. An important segment of the U.S. adult population considers the present arrangement as temporary and transitional. In their view, we have no draft because in "peacetime" there is no operational need for one. In fact, the "peacetime" military is not of crucial importance. If there is a "real" threat, they believe the United States will pass draft legislation and organize an effective military. Such thinking is both irrelevant and counterproductive. Deterrence rests on an active-duty force "in being." The United States must rely on a military force on active duty plus the limited number

of reservists who are trained and whose units are effectively linked to the active-duty force.

The Military Dimensions of National Service

National service, according to its supporters, is prepared to deal with issues of military manpower during "peacetime" in a democratic society. The all-volunteer system—especially in the combat arms—is recruited heavily from deprived minority groups. The theory and practice of national service is to work to reduce this distortion by broadening the base of recruitment.

Most advocates of national service stress that they are committed to a voluntary system. Under one form of national service, young persons could choose between military and civilian service. It would be the moral obligation of the next generation to serve before they entered their desired civilian careers. There has been considerable debate whether such a system would produce sufficient military personnel. Some designers of national service believed that a considerable number of young men and women would prefer the military component rather than social or community work. Others believed that length of service and amount of pay could be used to recruit personnel for the military. The rates of pay and terms of service would vary between military and civilian service with more favorable terms for military service (It must be remembered that there is no intention that most military personnel come from national service; only a limited portion would be recruited from the national service system.) Moreover, the system would be a national system since the nation was in need of a stronger sense of unity.

National service, especially the military component, had a strong appeal in the abstract. Implicitly, many advocates of national service believe that their program would make an indirect, if not a direct, impact on linking the military to the larger society. But political support for a national service scheme was limited as the nation moved to eliminate conscription. This was particularly the case among young college students strongly negative both because of their views about Vietnam and their resistance to participation in a large-scale federal "bureaucratic" effort.

In one sense, the all-volunteer approach was a success. It made possible rapid elimination of conscription. In a more fundamental sense, the all-volunteer military represents a partial failure. The leadership, both military and civilian, know that by the late 1980s recruitment

of combat arms personnel will be much more difficult, since the size of annual cohorts who become eighteen years old will decline markedly. In the late 1980s, the existing military manpower system will not be able to attract sufficient personnel with adequate educational backgrounds to maintain a 2 million-member active force. The all-volunteer system works over the short time because of high rates of unemployment and the high cash bonuses paid to recruits in the combat arms.

What sort of military culture and environment have the armed forces created under the all-volunteer force? The linkage between military personnel and the larger society is vital from the point of view of citizenship and civil supremacy. For this complex problem, there is a small, but growing, body of research data. Ten years after the establishment of the all-volunteer force, the results are mixed.

The difference between the original goals and actual achievements should be noted. First, for the initial ten years of the new system, the nation experienced extremely high levels of unemployment, unequaled since the Great Depression. Second, the actual size of the armed forces, especially ground combat, was much lower than projected requirements. Instead of a force of more than 2.6 million, active-duty personnel was closer to 2 million. Third, the cost of underwriting the all-volunteer force was much higher than anticipated. In short, the all-volunteer system produced fewer enlisted personnel at higher costs; the same was true for officers. Large bonus arrangements help keep up the flow of personnel into critical positions in the combat arms.

Limited educational background of personnel from the "underclass" has meant many operational problems, especially in the combat arms. In periods of very high unemployment, the quality of enlisted recruits increases, but unemployment is hardly a sound basis for the development of an effective force. Moreover, as a result of difficulties that the military face, there is high turnover and attrition of enlisted personnel. Again, it should be emphasized that the level of turnover in the all-volunteer force in the period from 1973 to 1978 was as high and, in some regards, higher than the level of turnover under conscription. This observation, repeatedly documented, is almost incredible. This extensive turbulence obviously creates operational and morale problems. High turnover is the result of personnel having limited educational backgrounds, and who fail to meet minimum standards of performance. In addition, high turnover reflects elimination by administrative procedures of young men and women who get "into trouble." A third group with high turnover completes one term and is not interested in or qualified for reenlistment.

The number of those who fail to complete a first term of enlistment has varied between 30 and 40 percent; high attrition and low enlistment rates are found in all services in varying degree. These men and women cannot be said to have had a gratifying experience. Instead,

they think of themselves as two-time losers—once in civilian society and again in the armed forces. Their military experience has not been rewarding or productive in terms of citizenship training.

However, there are some positive results from high turnover in terms of civil-military relations. The flow-through of personnel prevents enlisted ranks, especially higher noncommissioned officers, from becoming separated or isolated from civilian society. Because of the high turnover of enlisted personnel, we almost have a modern analog of the citizen soldier of earlier periods. But the advantages of high turnover exact a very high price in training and maintenance, as well as in weakened organizational effectiveness.

Although high rates of pay for enlisted personnel and technical training are important in recruitment, young men and women reveal that strong patriotic attitudes contribute to their decision to enlist. Data collected by military recruitment stations as well as government sponsored surveys confirm these findings.⁵ Attitudes manifested reflect a much higher level of patriotic orientation among enlisted personnel than reported by the mass media. Other data on patriotic attitudes among enlisted members demonstrate the stability of such attitudes. For the period from 1974 to 1980 active-duty personnel were asked whether "everyone should have to serve his or her country in some way." The finding for career personnel, as expected, was clearly positive and relatively stable. About 55 percent agreed; such attitudes do not reflect short-term adjustments but long-term or gradually changing attitude patterns. In essence, self-selection into the military and the impact of military environment were at work. By contrast, first-termers revealed a discernible rejection of the proposition that everyone should have to serve. This negativism gradually dropped from 27 to 7 percent. Clearly, without formal instruction or indoctrination, first-termers were internalizing the values of the career armed forces.

Data collected by John H. Faris go further in stressing the importance of patriotic motives and family military traditions in recruiting for the volunteer force.⁶ Faris reports that sons of military career fathers were approximately twice as likely as their peers from nonmilitary families to enlist in the military and about twice as likely to enter the career force. Moreover, it is an important point that these sons from military families had a higher aptitude for military service.

The debate about the social composition and the performance of the all-volunteer military sets the stage for proposals to include a military option within national service. The goal of the military "option" is not to recruit the bulk of enlisted personnel. To the contrary, under a national service military option, the armed forces might be able, if properly organized, to recruit between 100,000 and 150,000 persons annually. The military option is designed to increase the social representativeness of armed forces and increase the education qualifications

of military recruits. One obvious goal is to include more white middle-class Americans in the enlisted ranks.

Let us examine a hypothetical set of proposals for the military option under national service. The term of service would be two years; national service personnel would be expected to have above average academic qualifications. They would be responding to national goals and values as well as to economic incentives. They would not be assigned to specialized training programs, but to "run of the mill" assignments, including especially those combat assignments that could be learned in a few weeks. A central element of such a program is that, aside from nominal subsistence allocations and very limited cash payments, compensation would come not through monetary reward but through educational benefits. This would not be a mass GI education proposal, but rather a delimited program. Experimental programs of this variety have attracted superior personnel. Two years of college benefits for one year of military service would be offered.

Such a program appears to be one approach to meeting the manpower needs of the second half of the 1980s. The cost factor would be equal to or less than the pay of the current cash bonus. Such a program would restore to the enlisted ranks important components of college-bound personnel, who would enrich educationally, technically, and morally the climate of the units to which they were assigned. Their presence would be a contribution to restoring the effectiveness and self-esteem of military units. A unit in which all or most of the recruits have a limited educational background cannot have the morale and clarity of purpose of a unit with mixed personnel and higher educational achievement. Soldiers with heterogeneous backgrounds supply broader linkage between the military and the larger society. I would even offer the observation that mixed educational units will have higher standards of morality and personal conduct.

The Frontiers of National Service

There is a sharp difference between national service organized to supply military personnel and one oriented to civilian tasks. This distinction will persist. In short, if national service were to develop in the United States, the distinction between the two types of national service would be deep.

There is no shortage of plans for organizing a civilian component of national service. The list of tasks to be performed continues to grow. As I have already stated, it is my view that obligatory national service in the years ahead is undesirable and impossible. The political

support for any extensive obligatory program does not exist and most likely will not develop in the next decade. Advocates of a comprehensive national service can aspire, over a short time, to the development of a series of experimental exercises. Will the social work profession find a useful and appropriate role for itself under a large-scale national service? The only feasible approach is to launch a number of experiments in national service and work steadily toward their expansion.

National service would have to be volunteer since neither the armed forces nor the civilian component would want to act as a mandatory "reformatory" for delinquents. To state the issue alternatively, a small fraction of youth with deviant or obstructionist behavior could create difficult administrative and operational problems. Administrative leaders would have to maintain a system of rules that would facilitate their withdrawal. Most current planning for national service is based on voluntary involvement. Milton Friedman's view that national service is a tax is widely accepted; the central point is the size of the segment of society willing to pay the tax on a volunteer basis.

Even limited experimental programs of national service with civilian options are difficult to organize. Advocates of voluntary national service are sensitive to the complex administrative and organizational tasks. Common elements in various proposals for national service include viewing the program as a national program. This reflects, in part, the ideology of energetic leaders concerned with social integration of society. They wish to demonstrate that the nation still has powerful potentials for national integration.

I believe that organization on a state-by-state basis or even by metropolitan centers would make administrative problems simpler. Many plans have called for national service to be run by public, nonprofit national agencies that are not part of the governmental structure. In fact, plans generally call for a national agency to direct the operation and a series of operating subagencies to oversee specific programs. Most plans involve extensive decentralization, with coordination among existing agencies in health, welfare, education, and resource conservation fields. But, in fact, effective decentralization is hard to achieve.

In looking ahead, there is considerable concern about those proposals favoring a single national agency. Such a direction does not excite me. Planners of national service are seeking to make up for defects in civilian society. I am more inclined toward a "loose" plan. To be effective, national service would have to be more of a youth movement than a youth organization. The youth movement would seek to fill in gaps, and be fluid in its approach and organizational structure.

As I stated earlier, national service is not only a system for rendering needed community and national service. It is also an educational framework for teaching, "in the field," the balance of rights and obligations. One central and pressing issue of voluntary national service

is the imperative to developing a widely based strategy of recruitment. There has been considerable debate on this point. We are looking for a strong element of diversity in the youth groups recruited.

At stake is the very central question, Why are the work features of national service likely to produce more effective citizens in the welfare state? First, national service is committed to a diverse and heterogeneous population. The mixing and social interaction are designed to enhance the self-awareness of those who participate. Second, the work program of national service should increase awareness of socioeconomic realities. Third, and central, is the conviction that the cooperative endeavor of national service will serve as a form of education that produces positive responses for a democratic society engaged in building a welfare state.

National service is, in the first instance, designed to assist young people in making the transition from school to the adult world and to believe this transition can best be achieved effectively by some system of national service or the equivalent. The political support for a nationwide system of national service does not exist despite the very real appeal of national service programs. Of course, private groups can organize equivalent programs, but they have failed to do so on a noteworthy basis. Although I emphasize the experience associated with the proposed national service, one can hardly overlook the importance of prior classroom experience.

My research leads me to the conclusion that national service can be defined as working at a subsistence level of wage after high school or later on, at one of a broad range of tasks such as conservation, health, or old age problems. It is a device for teaching the student to balance rights and obligations. The learning gained particularly includes coming to understand the balance of benefits in contrast to civic obligations. The goal is not the reinforcement of traditional patriotism but rather the development of an understanding of the tasks that must be performed in a contemporary democratic society and an understanding of the balance of benefits versus civic obligations.

We are a statistically minded nation; therefore, the suggestion has been made that we should start to tabulate annually the young people already engaged in some form of national service. I am convinced that, even with the absence of governmental support, participation in some type of private national service is certain to grow year by year. Such an observation, however, fails to confront the central issue: whether a national service program should be developed by the government or by the private sector. The participants must not be limited to the students of elite colleges but must include a broad range of young males and females. No national service system fills its objective unless it offers the "rank and file" a national service opportunity.

Over the past fifty years, a variety of service programs open to young people has been created and abandoned, a process that reflects

uneven and unstable national commitment to national service opportunities. During the Great Depression, young people participated in the Civilian Conservation Corps (CCC) (1933-42) and the National Youth Administration (NYA) (1933-43). The CCC averaged 300,000 participants per year; NYA averaged 500,000. No federal programs existed from World War II through the 1950s. There were, during this period, only small CCC-like programs at the state level. In the modern era of youth service programs, the Peace Corps began in 1961 and VISTA in 1964. In the 1970s the conservation corps idea was revived in the Youth Conservation Corps (1970-83) and in the Young Adult Conservation Corps (1978-82). In addition, major demonstrations of national service in urban areas occurred in Seattle (1973-74) and in Syracuse (1978-80).

However, as of 1982, the nation witnessed the decline of several youth service programs and the abolition of others. Among those eliminated as part of budgetary restrictions and retrenchment were the National Teacher Corps, the Youth Conservation Corps, and the University Year of Action. Estimates of the total number of participants in the remaining programs for 1983 are as follows: At the federal level, the Peace Corps numbers approximately 6,000. VISTA has about 3,000 participants and the National Health Service Corps roughly 3,000. Of Peace Corps volunteers, about one-half are aged eighteen to twenty-four, the other half being older adults. The size of VISTA remains uncertain. In fact, VISTA in 1982 entered a phase-out schedule, although Congress has been resisting VISTA's elimination. Altogether, one could estimate that federally sponsored service opportunities involve approximately 10,000 teenagers and young adults in 1983.⁷

Several states have taken up the conservation corps idea. The most notable is California, with about 1,900 year-round participants in the California Conservation Corps in 1982. Much smaller programs in Ohio and Minnesota add 300 more "slots." Part-year and part-time programs in Illinois, Iowa, Kansas, Maine, and other states might add an additional 1,000 positions, for a total of about 3,200.⁸ Other service programs may exist at the local government level, but these are few and far between and there is no systematic way of tracking them.

In addition, there are a large number of purely voluntary efforts in which young people participate in health, education, recreation, social welfare, political, and other volunteer activities. In a nationwide survey of volunteer service in 1974, 22 percent of fourteen- to seventeen-year-olds and 18 percent of eighteen- to twenty-four-year-olds were engaged in part-time volunteer work of one kind or another.⁹

Most recent proposals for national service programs involve adding one year to the current curriculum. I would prefer to see that the sixteen years required for a college degree gradually and selectively be reduced to fifteen years. The "freedom" year would be devoted to some form of national service. Advanced placement of high school

students into college courses is already essentially a movement in this direction. The advantages of extending such a pattern would be immense, especially in terms of the financial saving in expenditures for education. Also, given the increasing shortage of young people entering the labor market, the additional labor supply would in the decade ahead be of vital importance to the U.S. economy. Such an analysis rests on my expectation that, gradually, there will be a long-term expansion in the productivity of the U.S. economy. Past performance is not a good indicator, however, of future trends. The short-term surplus of youthful labor will give way to an increased shortage, especially of trained young workers.

Despite the increased number of patriotic speeches made by senators and congressmen supporting national service, plus the large amount of favorable publicity in the mass media, the political basis for launching enlarged national service programs remains weak, in part because of restraints on the U.S. federal budget. However, there is support for a limited national service among both liberal and conservative political leaders. Various bills have been introduced, but the drive for either expensive programs or even small experimental ones does not command wide political support.

Public opinion findings must be carefully assessed. Although an overwhelming majority of American parents want their children to receive civic education, only a very small portion have specific preferences or ideas as to how this is to be achieved. Nevertheless, it is striking that the bulk of U.S. parents responding to national surveys support the idea that young people should give one year of national service. To some extent such a reply is fashionable; to some extent the replies represent patriotic feelings and the belief that national service will make their children more aware of their obligations as citizens. However, such attitudes expressed in surveys have not led to significant political results.

The fundamental barrier to national service (including local programs of community service), however, is the attitude of U.S. youth themselves. Again, public opinion surveys need to be read with great care. In the abstract, there is considerable support for the idea of national service among young people. Almost one-half of youth in the early 1980s expressed favorable attitudes and interest in serving; this is noteworthy. But many responses represented conventional expressions of what were considered appropriate attitudes. I do not doubt that there is considerable genuine feeling among college students and selected young workers "on the job" about demonstrating that they are "good citizens." I cannot make an effective estimate of the real support. Young people are caught in a bind generated by parents and the school system. They are attracted to the adventure and the moral value of national service, but also feel obliged to get on with their careers. The U.S. economy

is stressed—incorrectly in my view—as likely to get worse. Therefore, there is considerable pressure to get on with education and the world of work.

These observations are of secondary importance though. There is clearly enough interest in and enough need for national service to launch a range of limited experimental programs. Highest priority should be given to work on conservation programs, and there is considerable interest, too, in meeting the needs of neglected senior citizens. Programs for the elderly should be locally managed and organized, while resource conservation should be linked to national and state governmental agencies.

It is appropriate that the United States is not about to launch a large-scale national service program including both military and civilian options. And that is just as well. Existing restraints mean that when programs are developed, and there will be new programs in the years ahead, they will be small and more likely to develop effectively. The U.S. pattern of shifting from sharp restraint to excessive rapid expansion appears to be a national idiosyncrasy that needs to be avoided. It is crucial that as the nation gradually moves to new forms of national service, the programs be organizationally sound. They will and must be seen not merely as welfare programs but as expressions of civic duty. They must be structured as part of citizen obligation.

While Congress and public affairs leaders consider various approaches to national service, the main outlines of an alternative program have emerged. Most government loan and scholarship programs have worked to assist young people to avoid military service. Government loans made it possible for large numbers of students to attend college rather than to enter military service.

It is probably not feasible to require military service as a requirement for a government loan or scholarship. But it could be politically advantageous and realistic to require community service for particular government loans and forms of assistance to attend college. Such a format does not encompass many elements of what I believe are worthy aspects of national service, but makes much sense in the contemporary period. It seeks to link government guaranteed loans for higher education to service by the student in the student's local community, a modified and pragmatic version of the long-standing forms of work/study programs. It involves national political incentives as well as economic ones. There are various patterns for such an arrangement, but the underlying principle is common. Young men and women who want a loan for college education would receive the loan contingent on a term of meaningful service in the local community.

The nation appears to be more and more prepared to accept such a work/study program. Currently, more than \$6 billion are spent annually for loans and grants to students of higher education. Development

and enactment of such a work/study program would add very little to annual governmental expenditures. On the contrary, by making a loan dependent on community service, federal expenditures would be reduced by the value of the work.

Let me turn in closing to the important question of the role of the social work profession in national service programs. In the past, social work professionals have not actively supported national service. This was especially true of CCC-type conservation programs. Such programs were opposed on the grounds that times have changed and that they would bring few benefits to the economically disadvantaged young people of the inner city. The result of such criticism was a contribution to the self-fulfilling prophecy. Social workers helped during the period of the War against Poverty to undermine conservation camp programs. The social work profession did not realize that these camps had the potential to teach campers the meaning of work discipline. One cannot help thinking that part of the social work opposition to the national service concept was fear that their profession would suffer a partial loss of funds and personnel. But I would add that part of the opposition was ideologically based. Some social workers united with Milton Friedman in labeling outdoor work programs as authoritarian and even militaristic.

I do not know what role will emerge for the social worker in national service. I cannot even guess whether the profession will support or oppose national service. It is clear that as of the spring of 1983, the professional organizations of social work are quiet on the issue. They are devoting their efforts to undoing the cuts in the national welfare budget that have been instituted by the Reagan Administration. It is also clear that one of the main branches of social work—namely, case work—and group work as well will continue to grow. In an advanced industrial society such as ours, the demand for these services, like medical service, seems to be endless. I believe that providing them is a worthwhile objective for social workers to pursue. But when I think about national service I am thinking about social workers who are concerned with the management of institutions and communities. Under national service there will be a need for effective administrators, there will be a demand for what I call social administrators.

It is my view that social work as a profession will have to make decisions as to the extent of its participation in fashioning the organization of national service. No doubt among advocates of national service there are those who will be strongly opposed to the intrusion of social workers. In the United States, the term "social work" still conjures up the imagery of paperwork, excessive specialization, and a lack of vigorous leadership. But I believe that the best representatives of the profession have the potential to make a meaningful contribution to the development of national service. I personally hope that the

cial work profession will take a hard look at itself and the existing plans for national service. It should be able to map out with considerable clarity the tasks social workers can best perform. The interest of social workers in institutional treatment and community organization has a relevance to many of the projected plans for national and community service. I favor the inclusion of social workers in the management of national service because such involvement will improve the social work profession itself. As a by-product it will also reduce the hostility of the profession to the idea of national service.

Returning to our point of departure, the growth of citizen rights and benefits has proceeded faster and more rapidly than the clarification and institutionalization of civic obligations. The vitality of the national electoral system remains the core mechanism for restoring a "better" balance between individual rights and benefits, and group civic obligations. Since we are dealing with citizenship in its broadest sense, we are dealing with the content and consequences of patriotism as well as the formal and informal systems of civic education.

Historically, citizenship and patriotism included various forms of mutual self-help currently associated with the idea of national and community service. Participation in these enterprises helped to give concrete and fuller meaning to citizen obligation. The need to make use of this tradition has grown, strangely enough, with the growth of the welfare state. But I have no doubt that national and community service, as has been defined and described in this paper, is a potently powerful tool in moving closer to the required "balance" between individual benefits and group obligation.

Notes

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¹ *Public Opinion* 4 (June-July 1981): 27.

² William James, *The Moral Equivalent of War*, International Conciliation, no. 27 (New York: Carnegie Endowment for International Peace, 1910).

³ Morris Janowitz, "The Logic of National Service," in *The Draft: A Handbook of Facts and Alternatives*, ed. Sol Tax (Chicago: University of Chicago Press, 1967), pp. 73-90.

⁴ There is an extensive body of writing on national service. For an overview see *Youth and the Needs of the Nation: Report of the Committee for the Study of National Service* (Washington, D.C.: Potomac Institute, 1979). See also, esp., Michael V. Sherraden and Gerald J. Eberly, eds., *National Service: Social, Economic and Military Impacts* (New York: Praeger Press, 1982).

⁵ The available data on patriotism and enlistment are summarized and analyzed by James S. Burk, *The Persistence and Importance of Patriotism in the All-Volunteer Force* (United States Army Recruiting Command, USARECSR 82-6, December 1982).

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6. John H. Faris, "Economic and Non-Economic Factors in the Recruitment and Retention of Personnel to the U.S. All-Volunteer Forces" (unpublished manuscript, Towson State University, 1982).

7. Estimates from National Service Secretariat, Washington, D.C.

8. Estimates from Human Environment Center, Washington, D.C.

9. Donald J. Eberly ("Patterns of Volunteer Service by Young People 1965 and 1974," *Volunteer Administration* 4 [Winter 1976]: 20-27) cites data from surveys by the Census Bureau.

The New York City Rent Strikes of 1963–1964

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The New York City rent strikes of the early 1960s were failures in the struggle to mobilize poor people. For decades social settlements and neighborhood radicals had practiced rent bargaining. However, the 1963 civil rights campaign tipped the balance, resulting in a reckless organization of rent strikes to force landlords to make repairs. Radicals mobilized few of the poor, but their "unions" inadvertently provided many with entrée to the city's liberal bureaucracies, most notably, the New York City Housing Authority.

The New York City rent strikes of 1963–64 were among the most controversial events of a turbulent decade. By any standard, they failed both as mass movements and as influences on housing policy. Michael Lipsky's careful study of Jesse Gray's Harlem upsurge documents the inability of rent withholding to force landlords to repair dilapidated tenements, much less to shape government programs to rehabilitate or replace the slums.¹ Nevertheless, many community organizers still find them inspiring examples of indigenous power. Much of the ambiguous legacy stems from participant-observers who first portrayed the strikes as radical movements emasculated by the bureaucratic inertia of liberal government. Frances Fox Piven and Richard A. Cloward saw the strikes as rank-and-file outbreaks throttled by the middle-class paraphernalia considered necessary for poor people to institutionalize power. Fervent advocates of direct action caught up in (when they were not providers of) "movement" propaganda, Piven and Cloward

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self-help groups, it still aimed at cooperative ventures with city planning agencies. Chelsea's Hudson Guild settlement and the Upper East Side's Lenox Hill Neighborhood Association both pioneered block-by-block tenant organizing (that proved effective enough to arouse the competitive ire of nearby ALP clubs), but they also sought local concessions from the Title I program.⁷ Even the upstart in radical social change, Mobilization for Youth (MFY), found itself mired in mundane tenant casework. Launched in 1961 as an innovative attack on gang delinquency on the Lower East Side, MFY planned to reach "unaffiliated," lower-class teenagers by sending workers to galvanize PTAs, churches, block associations, and tenant councils. At their storefront on Stanton Street, MFY community organizers ached to become wholesale "advocates" for a steady stream of welfare and tenant clients. But rhetoric aside, Stanton Street handled housing clients in classic casework style, one at a time with tenant complaint forms dutifully forwarded to the City Rent and Rehabilitation Administration (RRA). The MFY staffers saw themselves consumed by endless paperwork, tedious, often fruitless meetings with tenants, and monumental inefficiency of city agencies. For all its radical claims, MFY's storefront, like Gray's Tenant Council, remained caught up in the liberal rent-adjustment system.⁸

Civil Rights Radicalizes the Housing Front

What ended this tenant work as usual for Gray, ALP clubs, social settlements, and MFY alike was the accelerating Civil Rights Movement during 1963, which was unwittingly reinforced by Mayor Robert F. Wagner, Jr.'s administration. Harlem's Congress of Racial Equality (CORE) chapter was typical of the new dynamism. Caught between the crosscurrents of civil rights and Muslim nationalism, New York (Harlem) CORE was forced to supplement its open-occupancy campaigns with sharp attacks on the ghetto's slums. In December 1962, when the chapter opened a housing clinic on West 125th Street, it announced that "CORE investigation teams will visit the buildings, call on residents, inform them of their rights," and expedite complaint forms to appropriate city agencies.⁹ By mid-1963, the clinic was helping to organize tenant associations. While it would still assist tenants at the RRA Harlem office, it was now ready to confront landlords with "direct action," including pickets and rent strikes. The chapter's aggressive minority had blueprints for organizing "street people" into a network of building and block councils that would "Mobilize Harlem." The June 1963 National CORE Convention endorsed such direct action including rent strikes against slum owners, and National Secretary

James Farmer unveiled pilot projects for Newark and Bedford-Stuyvesant, where CORE organizers would confront landlords. A few days later, Mayor Wagner announced that city inspectors and punitive RRA rent slashes would "press the attack on the slumlord's pocketbook." When the CORE Community Relations Department subsequently extended the Newark and Bedford-Stuyvesant effort to Harlem, with CORE's own "roving picket line," the City Buildings Department a week later unveiled its first "cycle" inspection of slums since the mid-1930s! Heralded by City Hall, inspectors prowled through Jefferson Avenue in Bedford-Stuyvesant and West 111th Street in Harlem, accompanied by curious tenants. Jesse Gray took this cue to step up his own pickets against Harlem landlords and to threaten massive demonstrations at City Hall.¹⁰

At MFY, this direct action radicalized the social work tradition. Co-operating more aggressively with tenant groups, Stanton Street resorted to pickets, demanded meetings with city commissioners, and advised on withholding rent to get needed services. The crisis atmosphere also hastened the creation that fall of the MFY Legal Services Unit and political scientist Frances Fox Piven's Tenement Housing Program. Legal Services was envisioned as a network of clinics where volunteer attorneys would dispense advice on welfare, consumer, and tenant rights, such as unfair evictions from public housing. The Tenement Housing Program, on the other hand, revealed MFY's impatience with storefront casework and near despair about building code enforcement. The program's heart would be a central file of housing violations, gathered from the storefronts and cooperating organizations and arranged by address and landlord. It would permit MFY to focus on the worst "slumlords." It would also make feasible surveys of prevailing rents (compared with RRA ceilings) and health inspections of selected buildings. As an inducement for compliant landlords, the MFY staff also planned a consultation service on available rehabilitation programs and municipal loan funds. By October 1963, the Housing Program had taken on a professional coordinator, three full-time Hispanic community workers, and seven student volunteers to work with the clinics and the central file. But insiders still complained that direct action was used only "sporadically" and chafed that the MFY housing program had "no overall plan."¹¹

By fall 1963, under the growing intensity of the Civil Rights campaign, this impatience finally ignited. On one level it flared as impromptu rebellion against summary eviction proceedings in the Magistrates' Courts. Scores of tenants, most without legal counsel but inspired by black protest, claimed they no longer owed rents for rat-infested rooms or that "Welfare" told them they did not have to pay. Only a few of these defenses were indulged by the judges. On another level, however, organized groups soon vied to be "the first" to apply the new advocacy.

The claim could have been made as much by the beleaguered New York University CORE on the Lower East Side as by Jesse Gray. In February 1963, NYU's student chapter, at 198 Eldridge Street, began to inspect seven vermin-infested pre-1901 tenements at 203–215 Eldridge and filed for rent reductions and repairs with the RRA and the Buildings Department. The city did nothing for months, then briefly inspected and summoned the landlord into Criminal Court for a nominal fine. Concluding that the city was "incapable of fast, decisive action against slumlords," chapter radicals demanded systematic rent withholding. The moderates urged a firm legal basis for acts that could prove "disastrous both to our image and reputation." They pinned hopes on a Section 755 defense or an Appellate Court cognizance of new grounds (vermin infestation, for instance) for a "constructive eviction." Meanwhile, organizers gained pledges from ninety-four Puerto Rican and black tenants for a November withholding and reassured the one-third on welfare that they need not pay rent where tenements had MDL violations. The CORE volunteers from prestigious liberal Democratic law firms and James Farmer arranged with city officials for a tough, rehearsed prosecution. But the preparations, the tenant witnesses, and photographic evidence were wasted by inept prosecutors and mixed-up court dates. When the case finally got top-drawer attention—from Assistant Corporation Counsel (and a Liberal Party leader) Simeon Golar—the outcome was a mere \$300 fine. Sull the landlord had enough. He relinquished two tenements to his creditor and then approached CORE to take over the others! Weary from the efforts, the NYU chapter had nonetheless stumbled on the remarkable prospect of unnerving a whole class of "slumlords" on the Lower East Side. The radicals urged CORE to send to other landlords the message "that we do not mean to pick on just one or two of their buildings, letting them do as they please with the rest." These were heady days, particularly with the news of the strikes spreading through Harlem.¹²

During the early 1960s, Jesse Gray had restyled his Harlem Tenants Council into the "Community Council on Housing," but only the name had changed. It was still Gray and a few unpaid, part-time "organizers"—still, as Mark D. Naison reported, an "informally run operation that teetered on the edge of bankruptcy,"¹³ and those same blocks in the Fourteenth Assembly District, specifically, East 117th Street. After a mid-October 1963 protest at City Hall, Gray decided to lead sixteen of "his" buildings on strike. Activity soon overflowed at the CCH storefront; and at a mass rally in early December, Gray claimed fifty-two buildings, with almost 3,000 tenants, ready to join the movement. While city leaders rushed inspectors and arranged drastic RRA rent reductions, Gray was assembling a "Rent Strike Coordinating Committee" of Harlem religious and political VIPs. From time to time he held rallies, set up more paper coalitions, and got token support from New

York CORE and local labor leaders. But his pickets, his eviction protests, and his confrontations with the police remained pseudo-events for the media. On December 30, eviction proceedings against thirteen tenants at 16 and 18 East 117th Street were heard in court, accompanied by Gray's raucous entourage and eager reporters. When the city magistrate, at the urging of Gray's attorney, accepted the applicability of Section 755 and ordered rents paid in escrow, Gray jubilantly pronounced the support of 300 more buildings with 1,000 joining by January 15!¹⁴

Gray spent early 1964, however, juggling these claims, while chiding the Wagner administration to come up with substantive reforms. Regarding the Harlem strikes as the most explosive episodes in a city wracked by civil rights demonstrations, Mayor Wagner virtually endorsed "legal" rent withholding. He proposed to consolidate housing inspection agencies and sent to the state legislature an agenda for more inspections, more housing courts, stiffer MDL penalties, plus a bill to transfer escrow rents from the courts to the Department of Real Estate to pay for repairs. Gray was the hero of the hour at the January 1964 meetings of tenant leaders that kicked off strikes on the Lower East Side and at city rent control hearings (having staged the day before one of his vintage stunts to dramatize Albany's responsibility for ghetto housing—a "Rats to Rockefeller" campaign). Soon enough, his unverified claims about the "spreading" strike jaded his media contacts. At the same time, the Wagner administration was applying what Michael Lipsky has characterized as deft, symbolic gestures toward the slums. When Gray demanded action, City Hall obliged by sending attorneys against the 117th Street malefactors and slapping jail sentences (later reversed) on the managing agent and his lawyer. The Buildings Department invoked the new City Receivership Law to take over 16 and 18 East 117th Street, the tenements that had touched off Gray's strike. By then, Gray was also caught up in name-calling feuds with the police commissioner and in a controversy over alleged radicals in the city antipoverty program. By spring 1964, the Community Council on Housing was sorting through court papers that liquidated the last strikes.¹⁵

Tenant Direct Action Proliferates

Gray's example, however, had inspired tenant direct action throughout Harlem. For the radicals in New York (Harlem) CORE, now in their own East River CORE chapter, this meant plans for disciplined community organization. They envisioned "group area teams" of ten workers

per block to stir grassroots issues and contact "gangs, street people, numbers runners, and anyone else whose presence on the block is conspicuous."¹⁶ By late March 1964, the chapter claimed to have brought fourteen buildings (with a tenant population of 1,962) on rent strike and to have organized tenant councils in another eleven (with 1,100). But its greatest success was in the 2,100-unit Robert F. Wagner, Sr., Houses, where the chapter's picket lines won stays against "unfair" evictions and attracted tenants already mobilized by local school boycotts into a "firm, democratic" project council. In the East Harlem barrio, Ted Velez, a young City College graduate and social worker, claimed that his two years' contact with Jesse Gray had helped him and a few friends to set up the East Harlem Tenants Council on East 123rd Street in 1962. Boasting his own network of building and block captains, in early 1964, Velez resorted to Section 755 rent strikes on East 123rd Street to pressure landlords to make repairs. Gray's influence also helped push Reverend Norman Eddy's East Harlem community group, the Metro-North Citizens Committee, from the "Christian witness" of rent counseling to street demonstrations and rent strikes. During 1963, MNCC had nurtured a modest "dues"-paying membership, a Thursday night rent clinic, and volunteers who scouted the tenements to detail building violations. In early 1964, Eddy met with Jesse Gray and other tenant radicals and boned up on the Section 755 defense, but he remained carefully distant from those whom he regarded as too inclined "to bring the housing system to its knees."¹⁷

Gray's apparent triumph also settled Brooklyn CORE's ambivalence toward ghetto organization. Up to 1962, the chapter's middle-class blacks and Jews had concentrated on open-occupancy pickets with growing uneasiness about their failure to "reach the Negro masses." But in late 1962 and early 1963, members staged noisy demonstrations about garbage pickup along Gates Avenue and job discrimination at the Downstate Medical Center. In September 1963, a CORE "task force" began canvassing Bedford-Stuyvesant and found tenant committees impatient with the Buildings Department's cycle inspections and ready to withhold rents. The chapter began to organize buildings and negotiate with landlords. "We had reached the point where we did it systematically," recalled Major R. Owens, head of Brooklyn CORE's Housing Committee. "We'd move into an area—a whole block and canvas the block, distributing leaflets, explaining what the program was all about."¹⁸ To get quick referrals from the Buildings Department, Brooklyn CORE lived up to its "well-known reputation for taking direct action against city agencies," as demonstrations at the borough rent office cut the response time on CORE's cases down from two months to two weeks. With the first, spontaneous strikes at 104–112 Rochester Avenue, CORE quickly got the Buildings Department to document "horrid" conditions and the RRA to impose one-dollar rents.

In court on December 13, Brooklyn CORE's attorney successfully gained a Section 755 rent diversion until the violations were corrected. With that, CORE's new Rent Strike Co-ordinating Committee dispatched volunteers with detailed organizing kits complete with interviewer sheets, city rent-reduction forms, and membership blanks for the "Community Tenants Council." Organizers were told to emphasize the strike's legal rationale "to obtain a [court] ruling of 'constructive eviction' " to cut off rents until landlords made repairs. After the landlord served dispossession notices, CORE organizers would distribute applications for rent reduction, request immediate "cellar-to-roof" inspections from city departments, and even schedule a photographer's visit to individual apartments. To defray costs, CORE urged membership in the tenants council at a two-dollar annual fee. Yet, by late January 1964, the tenants council counted less than fifty members, although in late February, CORE was claiming that fifty-one buildings (400 families) had gone on strike.¹⁹

Frustrations on the Lower East Side

On the Lower East Side, MFY's Community Organization staff seized on the rent strike as an ideal instrument to involve the "indigenous"; their real concern, however, was to prove the extent of their insurgent intentions to civil rights and radical groups who sniped at MFY "paternalism." Goaded by NYU and Downtown CORE, and by tenant advocates from the Metropolitan Council on Housing (Met Council) and Progressive Labor, MFY's rent clinics on January 11, 1964, launched the "Lower East Side Rent Strike" (LERS). Ambitious in scope, it was the closest thing to the radicals' dream of a general rent strike. Organizers agreed to deploy a few Trotskyites, Progressive Laborites, and MFY staffers, perhaps thirty in all, to the tenements north of Houston Street, from Third to Fifth Streets. NYU CORE, supplemented by the University Settlement and the East Side Tenants Council, would send twenty-six regular organizers and five more on weekends to Eldridge and Forsythe Streets, from Delancey to Houston. The Puertorriquenos Unidos and the Stanton Street clinic would "work" Seward Park Extension and expected eight to ten buildings to go out imminently. Some leaders expected the strikes to force beefed-up inspections, fines, and perhaps jail sentences for landlords. A few talked about foreclosing on absentee owners. Others wanted an expanded City Receivership Program or new laws to place struck buildings under the aegis of the Housing Authority. An MFY leader suggested that tenants could influence the improvement of local schools or garbage pickups. These

divergent goals were papered over by a general euphoria, during which Met Council pledged twelve volunteer lawyers coordinated by a young, antipoverty attorney, Richard Levenson, and an MFY organizer offered generous financial support. A project of formidable proportions seemed under way.²⁰

Kicked off with an evening street rally, a roaring bonfire, and publicity releases claiming that seventy-five buildings would soon "go out," the movement was already faltering. The Puertorriquenos Unidos claimed ten of the seventy-five buildings, but only one had actually struck, with another "willing to." The NYU CORE and the University Settlement could only report "contact" with forty, and Progressive Labor with another twenty-five. By early February rent withholding had proceeded in just ten (with no estimate of individual tenant accounts). The MFY grew uncomfortable with Stanton Street's radical image, while CORE had misgivings about Progressive Labor leaflets at LERS rallies. Mid-February brought claims of sixty-seven buildings on board, but strike captains worried over a lack of momentum. University Settlement's Frances Goldin suggested that building delegations descend on the RRA or picket the commissioner's home. Speaking for the legal staff, Levenson reminded the leadership that Section 755 defenses depended on posted MDL violations by the Department of Buildings, which meant that the LERS would have to schedule visits by city inspectors. Black activist Leroi McCrae ventured that the LERS should take on no more buildings unless 50 percent of the tenants were already withholding or MDL violations had already been posted. Attorneys Levenson and Nancy LeBlanc, joined by Frances Goldin, seconded this pullback. Less than three weeks after the bonfire, the Lower East Side Rent Strike had ended active recruitment of tenants.²¹

The LERS was soon desperate to hold on to the tenant support it already had. On March 11, Levenson complained that legal defense was stymied by tenants who failed to show up for court cases—even for their own dispossession proceedings. Speaking for the organizers, McCrae conceded that LERS had begun with "a splash" of claims, but his force was "now going back to do the detailed work" among tenants.²² Levenson insisted that his ten lawyers, busy on different cases, could not also schedule court appearances, transport tenants, request inspections, subpoena MDL violations, gather photographic evidence, and keep track of endless court adjournments. He wanted an LERS court coordinator. The LERS tried to scrounge up a paralegal, but not until late March did the lawyers reorganize their own apparatus and rotate their court appearances on definite days. While some radicals talked about political reprisals against one "Slumlord Judge" (which unnerved the attorneys), Levenson placed the blame elsewhere: "The rent strike organizations, especially those with national affiliations must begin to produce lawyers. This panel is insufficient to handle the

volume of rent strike cases. One or two out of five cases are won by tenants (pay rent into court or dismissal). Three of five cases lost (rent paid to the landlord)."²³ And he repeated, "CORE, NAG [Nonviolent Action Group], Univ. Settlement, must produce lawyers, especially national organizations."²⁴ Adding that "everybody agreed that the weakest part of our system is the sad shape of our own building files," Levenson wanted systematic dispossession folders, with detailed MDL violations, subpoena receipts, and notarized photographs. By the first week in April, the legal staff served notice that it could no longer continue without more volunteers, particularly from CORE. During that week, only two evictions were dismissed and one settled compared to nearly fifteen decided for the landlords. Levenson could report no successful Section 755 defenses. A week later, the Council of Puerto Rican Organizations resigned from the LERS, while CORE's further involvement was eclipsed by its planned demonstrations at the New York World's Fair.²⁵

With the departure of the Puerto Ricans and CORE, the balance in the LERS shifted toward the white, middle-class activists from the East Side Tenants Council and Met Council, who never did care much for the rent strike tactic. They quickly phased out the loose, federated LERS for a new coalition, the Lower East Side Tenants Action Group, that would feature a solid organizational chart, an executive secretary to oversee daily operations, and finances based upon per-capita assessments, with costs for MDL searches and Buildings Department subpoenas borne by tenants. Backing away from further commitments to the tenement withholders, LESTAG Secretary Esther Rand made clear her focus on "immediate" contests over Title I site removals.²⁶ The LESTAG Rent-Strike subcommittee, dominated by MFY's Stanton Street organizers, did attempt to carry on the effort, but its late June 1964 meeting showed how little had been accomplished in the previous months. The subcommittee hashed over the same organizational charts, complaints about RRA foul-ups, and organizers' frustrations: "When tenants get together they talk but don't appear when they're needed—for tenant delegations and actions. Once repairs are made tenants stop helping rent strike organizations. Need to have special organizers' meetings to develop tenants who are ready to do more than attend tenants' meetings. We need more community workers."²⁷ Despite these attempts by MFY's storefront, the LERS was dead.

The fervor had also ended for the students at Downtown CORE, where the strikes had taken root on the Lower East Side. By May, at Downtown CORE's first triumph, 203–215 Eldridge Street, the camaraderie was gone, as the "people got scared off." The chapter, in any case, was consumed in support for the Mississippi Freedom Summer Project (an obsession after the murders of three SNCC workers, including Michael Schwerner, a Downtown CORE founder) and by a Lower East

Side voter registration drive. An MFY observer, oriented to systemic community organization, concluded that "amidst the casual drift and out of volunteers," whose offers of service were wasted by the apparent indifference of chapter leaders, "not much happens in housing."²⁸ That summer, Downtown CORE launched another tenement drive, "Operation East Side," with pep talks to an earnest team of twenty. Like the decentralized SNCC effort in rural Mississippi, they were told to fan out on designated blocks, "work" their assigned building and act "on his own initiative as much as possible in working toward solving the individual problems of the building."²⁹ At this juncture an organizer's question, "What was meant by 'organizing' a building" elicited further confusion: "Was the purpose of CORE merely to get the landlord to make repairs, the city to inspect, and possibly to have the rent reduced or were the people being organized for something more?"³⁰ The MFY observer was appalled. Another mid-August session at the CORE loft seemed equally aimless: "Monday evening was no different than many of the past evenings at CORE: people drifted in and out, new faces and familiar ones, chaos, disorganization, fine talk about the way CORE was going to organize itself, and the neighborhood and nothing really happens."³¹ By late August, ostensibly because of voter registration, Downtown CORE's door-to-door tenement activities were at a standstill.³²

Tenant Radicals and the Routine Demands of the Poor

Why did the rent strikes fall so short of their goals? Despite all the glib talk that radicals need only move in among the poor and arouse their angry solidarity, tenant unions proved monumentally difficult to organize. The Stanton Street Tenants Association, prominent in Piven and Cloward's account of the welfare rights upsurge on the Lower East Side, never gained much hold on the neighborhood. After MFY organizer Luisa Montes, a thirty-year-old Puerto Rican, sent inquiries to patrons of the Stanton Street storefront in February, 1966, forty-five tenants convened, elected a slate of neighbors, and agreed to meet every Friday night. But despite Montes's attempts, the association failed as a real participant group. Montes, with a few trusted subordinates, ran a tough, no-nonsense operation. She avoided Welfare Department voucher cases and shunted petty consumer complaints to neighborhood lawyers. She would take on only "major" quarrels with landlords and remained cynical about the need to goad apathetic

tenants into collective action. During a typical day, August 4, 1964, she saw nine walk-in clients, who wanted help on everything from union pensions to getting rid of junkies lounging on a tenement roof. In between, she was on the telephone, bargaining with landlords, encouraging tenants, and prodding the RRA. Major victories never occurred, nor did a rush to join. Montes's own data for a Ford Foundation audit reported that from January through June 1964 (during the LERS), the Stanton Street Association dealt with 170 tenants in eighty-two buildings, but could claim an active membership of only twenty, with twenty-two inactive.¹¹

These militant catalysts of poor people against grasping landlords and callous city agencies managed little mobilization of the poor chiefly because they were swamped by their routine requests—to provide access to these very agencies. The Stanton Street Association became a one-stop convenience center for a host of community services. During the summer of 1966, 45 percent of its cases involved applications for public housing, compared with 26 percent for building violations and rent overcharges. It also dispensed welfare advice, sponsored English and sewing classes, and obviously filled a social void on the block. Organizer Daniel Kronenfeld proudly pointed to MFY's most successful, indigenous organization, the Puertorriquenos Unidos, half food co-op and half block-action group founded by a local tenement "super." But at its core were those "expressive" activities that MFY considered crucial to the lives of lower-class Hispanics. "On a Friday night [one organizer reported in June, 1966] when there is to be a meeting, those attending (10, 20, 30) may be present at the club for between two or three hours and the actual meeting can take anywhere from seven minutes to over an hour. During this time it is not unusual for people to walk in and out participating when they are present. Very often meetings are quite dull—few add to what the officials announce and then when it is over everyone will start joking and talking, drinking coffee, playing dominos, etc."¹² Militant East River CORE, which took up tenant councils and rent strikes as a basic tool of its Harlem mobilization, left an equally dismayed postmortem on such grass-roots institutions: "Tenant councils have not proved to be long-lasting because their only reason for existence has been redress of grievances. Consequently, when the immediate grievance is removed or compensated for, the councils collapse. *Programs must begin with and be based on social and recreational activities.* Forming a neighborhood club of teenagers to hold dances and play basketball is much more likely to create a permanent influence in the community than organizing a tenant council. Likewise block associations and women's clubs."¹³

Few tenant leaders could anticipate the extent to which they became the unacknowledged agents of the New York City Housing Authority, although such had been the painful experience of tenant groups at

least since the ALP clubs in the 1940s. By the mid-1960s, the city was a landlord to more than one-half million, and the waiting list for coveted apartments had grown to over 100,000 families, a vast undertow for the city's poor. While radicals carped at the Authority's "sterile," "institutional" facade, its sheer size and more than 100 projects guaranteed a wide variety of apartment sizes, locales, and neighborhoods, which provided real housing mobility within its huge domain. No wonder a large proportion of inquiries at MFY storefronts concerned help with Housing Authority application forms and with Welfare Department payments of project security deposits and rent. The Puerto Rican *Unidos* was overwhelmed by such requests. Its most notorious mobilization was not a strike, but a sit-in at Housing Authority offices to demand quick processing of applications for apartments in the project. This unlikely symbiosis continually weakened tenant militance. Gray's early influence in the Fourteenth Assembly District rested on an organizational base in the Stephen Foster Houses. Compared with the drudgery of canvassing dreary, six-story walk-ups, East Harlem CORE preferred the easy gains that came from negotiating with the project manager at the Robert F. Wagner, Sr., Houses. Furthermore, city housing and development agencies could always dangle impressive development plans, like the one that took the steam out of Ted Velez. East Harlem militants and another that decisively drew the Metropolitan North Citizens Committee from rent strikes back to community renewal.³⁶

Membership in a tenant council rarely signified a determination to withhold rent, even under the "legal" strikes made possible by Section 755. The MFY confronted a pervasive timidity, particularly among the elderly and among those who sublet—both in large numbers on the Lower East Side. Major Owens commented that the Brooklyn CORE's work was inhibited by the tenant belief in the "myth of the landlord's invincibility."³⁷ The Stanton Street Tenants Association struggled constantly against an ingrained wariness that seemed hardly affected by the LERS. Throughout the summer of 1964, Stanton Street was representing four rent withholders at 142 Suffolk Street (while sixteen others refused to go along) and eight more (half the tenants) at 33 Willets. In late July, twelve tenants at 146 Norfolk filled out city rent forms to prepare for withholding; but within days Montes learned that those tenants "now had hot water, which they had not had when Luisa first began to deal with their buildings, and didn't want to see any further repairs through the Stanton Street office, 'because they've heard we're Communists.'"³⁸ Indeed, the strikes' most salient characteristic was the disproportion between exhaustive efforts and limited outcome. The brief, united front among those adjoining tenement on Eldridge Street was the result of the NYU CORE's ten months of intensive canvassing and one stubborn landlord. For at least twenty

months, Gray had picketed and marched over the Fourteenth Assembly District, particularly 117th Street, and produced few solid buildings and far fewer strikers. In Brooklyn, where CORE had demonstrated along Gates Avenue for half a year, the major response came from tenants politicized by the chapter's job demonstrations at Downstate Medical Center. Whether Gray's opportunists, NYU CORE's impulsive students, Brooklyn's older, methodical professionals, East River's militants, or MFY's social work radicals, organizers mobilized few strikers, probably no more than 2 percent of tenants living in those intensely canvased blocks.⁹

Tenant Unions in Search of a Strategy

This meager success at grass-roots mobilization reflected the quality of direction at the top. Tenant leaders could not decide, much less act, on the merits of what might be called the "structural" versus the "territorial" approach to organizing the tenement poor, and they never overcame the fallacies of both. Ghetto boundaries and the self-proclaimed writ of groups like Brooklyn CORE or the LERS inspired confident teams to settle in and "work" specific blocks, raise the critical consciousness of tenants, and build neighborhood solidarity behind a strike. This territorial approach not only romanticized the rebellious potential of the poor but overlooked the diversity and degree of disrepair of the housing stock, the differences between lease holders and subletters, families and single occupants, the working poor and those on welfare, and between those resigned to substandard walk-ups and those aspiring to enter the city projects—all crucial differences that pervaded the typical slum block. These differences meant that tenant unions could never be organized along the industrial lines of the workplace. They also produced infinite mischief when tenant leaders sought the standard Section 755 redress in the courts. Varied, complex patterns of landlord ownership, compounded by the decentralized municipal court system and idiosyncratic judges, produced a crazy-quilt pattern of misplaced evidence, bureaucratic delays, and endless adjournments. Such legal chaos frustrated organizers who yearned for decisive justice and disgusted tenants who wondered why some neighbors on strike were ignored by their landlords, some had to settle, and still others were evicted.¹⁰

From time to time, rent strike leaders professed the "structural" approach: to organize all the tenements controlled by a single, interlocking ownership and thus threaten a landlord's entire rental income. While Jesse Gray occasionally flirted with the idea, it positively enthralled

radicals on the Lower East Side. The East Side Tenants Council (largely made up of old ALP activists) had tried to organize occupants of the scattered tenements owned by Morris Dankner. Their efforts gave plausibility to the sharp focus planned for the MFY housing file and provided the background information behind a bitter NYU CORE press release in the fall of 1963: "Members of the chapter have spent hours in the Hall of Records determining the relationship of slumlords . . . to each other. We have found that there are about twenty-five slumlords who indeed control and hold over 80% of the Lower East Side of Manhattan. They are intrinsically intermingled with dummy holding corporations, financial eye-winking, failure to maintain buildings, etc., and they all hold slum properties."⁴¹ In fact, the chapter had conducted no such research, but was convinced it had found its own genuine slumlord on Eldridge Street. Nor did MFY, armed with its housing file, ever adequately investigate the alleged interlocking control of neighborhood properties. The idea of a landlord Gordian knot grew with the organizers' impatience on the Lower East Side. As early as mid-December 1963, NYU CORE attorney George Schiffer soberly assessed what the organization had stumbled into on Eldridge Street. The chapter's experience showed the limits of "uncoordinated, unsupervised activities by a local group"⁴² and of street demonstrations that lacked a legal follow-up with city administrators. Organizing more than a handful of tenants was proving a vast undertaking. Any realistic campaign against the slums would take "an immense, coordinate effort of National CORE chapters and every competent professional and semi-professional we can lay our hands on."⁴³ Yet Schiffer drew back from that immense mobilization to suggest an alternative "attack on the basic 100 landlords." Even that struggle, Schiffer warned, would require coordinated, persistent legal and financial effort. It would require negotiations on the part of "mature, National CORE people," and it would take "several years."⁴⁴

Few rent strike organizers were armed with such caution. For all their claims about understanding the poor and their needs, radicals plunged into tenement organization with little firsthand knowledge of tenement residents, their housing problems, or their aspirations. Lured by the glamour of direct action and the excitement of ghetto rebellion, they never saw that rent strikes to force repairs of dilapidated slums seemed senseless to people struggling to move uptown or into public housing. This is not to argue that the rent strike was entirely futile. As in previous decades, strikes for limited objectives, backed by effective tenant bargaining power, and aimed at nearby landlords with much to lose, were eminently practical. This more modest structural approach remained a powerful weapon, when used with adequate preparation and deliberation. The territorial approach also had potential, when taken on by radicals willing to dedicate years to "the movement"

and make tenement organizing a permanent career. In the final analysis, the rent strikes were abandoned on all sides—victims of an impatient upward mobility in the 1960s. They were abandoned by tenants who pursued different avenues of housing mobility, by self-styled radicals seeking other, more fruitful crusades, and by thousands of small landlords who finally had enough of the newfangled harassment and simply abandoned their buildings.

Notes

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The Plight of Homeless Women

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The plight of the homeless population in the United States has recently drawn public attention. This article focuses on the growing number of women among the homeless, their special needs, and the harsher conditions of life for homeless women than for men. It suggests a comprehensive three-tiered service system to address the needs of the homeless population in general, and homeless women specifically, and recommends several courses for political and social action that address systemic causes of homelessness.

Last winter Rebecca Smith, age sixty-one, died in New York City. She froze to death in the home she had constructed for herself inside a cardboard box. She preferred it, she said, to any other home. Rebecca Smith had spent much of her life in a state psychiatric hospital under treatment for schizophrenia. Life in the box was preferable. In a sense, many people watched her die: her neighbors, the police, the Red Cross, and finally a city-dispatched social worker and psychiatrist. In a larger sense, the nation watched too, because her death made the front page of the *Washington Post*.¹

The senseless tragedy of Rebecca Smith's death immediately prompted nationwide concern for the plight of the homeless. Those who have worked with the homeless find this new acknowledgment of the thousands of homeless people in our midst rather strange. They also find somewhat remarkable the morbid curiosity demonstrated about them and the quickness with which they are branded a bunch of smelly

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sociopaths, chronic "crazies," to be dealt with someplace, but not here. Yet people and organizations are beginning to pay thoughtful attention to the problems of the homeless, and programs and services are emerging to meet the needs of this long-neglected population. Concerned groups are organizing to provide an increasingly vocal advocacy network for coping with the needs of the homeless. Despite this activity, however, existing public and private welfare policies preclude adequate service delivery for the homeless population.

The intent of this article is to describe the homeless population and the special needs of women within it. In carrying out this intent, the article first reviews apparent causes of homelessness and the types of programs that currently exist for women. It then suggests a design for a comprehensive service system for homeless women and concludes with a proposal for political and social action that will be essential if the systemic causes of homelessness are to be eliminated.

The rapidly increasing number of homeless people in America poses a new challenge to cities all over the nation. New York City has had to divert major resources to cope with an expanding street population because a court decree requires the city to provide public shelter for homeless men.² Throughout the country the capacity of agencies to make a place for everybody is being severely tested. Columbus, Ohio, a city badly hit by the declining economy, was forced to open the first public shelter accommodating 150 people a night.³ The Traveler's Aid Society in affluent Houston has housed as many as 1,000 economically disabled people a month. This is nearly 40 percent more than the previous year.⁴ In Denver, one church opened a shelter and within a week 400 people had applied.⁵ In 1981 the Community Services Society of New York estimated that 36,000 people in that city were without homes.⁶ More recently, Los Angeles County Department of Mental Health officials estimated that a minimum of 30,000 people are living on its streets.⁷

While these numbers are alarming, they also are misleading because there are so many methodological barriers to obtaining a sound census of the homeless. What is important is that public and private agencies, researchers, and the media are reporting readily visible evidence that the number of homeless people is rising and that radical changes in their circumstances and composition have taken place over the past fifteen years. These changes call into question the propriety of relief measures that traditionally have been applied to the contemporary homeless population.

Workers with the homeless report that more women, elderly, and young people—particularly black women and members of other minority groups—have slipped into a population once dominated by older alcoholic white men.⁸ Any profile that attempts to develop an aggregate notion of the type of person in today's homeless population

ures the most distinctive features of this group: its variety and its heterogeneity. Surveys of these people are unreliable as they include those who have been in public or private shelters. Yet, these clearly are only a small proportion of street people.

Verification of the picture of who the homeless are is possible by considering why people find themselves homeless. Summary evidence from those who have studied the homeless population indicates that antecedents of homelessness are: (1) lack of housing, (2) unemployment and poverty, (3) deinstitutionalization, and (4) domestic violence and abuse.⁹

Research conducted by the Vera Institute of Justice on user characteristics of homeless people in a women's shelter demonstrated that there is a direct link between such factors as evictions and lockouts and the consequence of homelessness.¹⁰ As economic pressures for speculation of land for renovation and upgrading mount, evictions continue to increase. The City of New York's Human Resources Administration has reported that a fourth of the recent applicants to women's shelters are there due to job loss.¹¹

Census data on poverty reveal that from 1980 to 1981 an additional million people entered the official poverty index as unemployment rates increased.¹² According to the Census Bureau figures, the burden of poverty falls disproportionately on families headed by women, children, on young adults, and on ethnic minority groups.¹³ The "institutionalization of poverty" has particular significance in the growing shifting homeless population. Many women have no place to turn to the streets. Significantly related to both income and homelessness is another fact, namely, that public assistance is denied to people who have no address.¹⁴ People lose their benefits when they become homeless and in turn, the means of finding another home.

There is considerable documentation to indicate the presence of large numbers of severely disturbed individuals in streets and shelters, many with histories of psychiatric hospitalization. Ill-planned deinstitutionalization, such as that leading to the death of Rebecca Smith, is cited as the most prominent cause of homelessness. Whether or not this is so, recent studies have attested to the growing number of psychiatrically disabled among the homeless poor. An informal study conducted in the Los Angeles skid row district indicated that 60 percent of the women there were mentally ill and had histories of psychiatric hospitalization.¹⁵

Many homeless women and adolescent females report that they left their homes after repeated incidents of abuse by their spouses, rape, incest, and desertion. Despite the strengths of the Domestic Violence Prevention Act, cutbacks in expenditures for welfare programs include drastic slashes in provisions for battered and abused women and displaced homemakers.¹⁶

Living and Coping Patterns of Homeless Women

Although there is a substantial body of literature concerning male vagrants and transients, until recently very little existed concerning unaffiliated women who are not alcoholic. Bahr and Garrett¹⁷ conducted studies comparing dislocation factors among men and women in urban shelters and explained the differences by sex in the etiology of homelessness and the family backgrounds of this population. They also examined the drinking habits of men and women admitted to emergency shelters in New York City. Judith Strasser¹⁸ provided a sensitive descriptive profile of the shopping bag lady population, exploring personal appearance, hygiene, daily routines, health conditions, and their use of services. Ambulatory schizophrenic women were described in a report by the New Orleans Traveler's Aid Society.¹⁹ Most recently the media have exposed the box people—the Rebecca Smiths who have come to inhabit city streets or live underground in subway stations.

Because the little that has been written about homeless women has focused on the skid row environment and alcoholism, research is needed that does not treat women as derelicts but as homeless people with specific women's problems and needs. This is necessary because the apparent systematic avoidance of dealing with homeless women in research and literature suggests that women receive harsher judgment and less adequate services than men even at this marginal level of society. As women and their families continue to enter the ranks of the homeless—as victims of the economy, of landlords, of a depleted mental health system, and of spouses—society can no longer neglect them.

What may be a benchmark study of this problem was conducted by the Manhattan Bowery Corporation in 1979.²⁰ The strength of this report, which was not widely circulated, lies in the fact that it dispels many of the myths about shopping bag ladies. Several of its findings are particularly important: (1) Little is known about the homeless population, except that we are sure its numbers are growing. (2) The three municipal shelters for women in New York City are unable to meet the growing demands of the homeless population. It is the only city in the United States providing public shelter for women. (3) Homeless women are singularly vulnerable to crime, the elements, and other hazards of the streets. (4) Some characteristics, viewed as bizarre (e.g., foul odors), are conscious defense mechanisms. (5) Mental disability per se is not a pervasive reason for women's alleged refusal to use available services. (6) The primary causes of their disaffiliation are to be found in the socioeconomic circumstances of poor, middle-aged, and elderly women—in particular, their isolation. Homeless

women do not choose their circumstances. They are victims of forces over which they have lost control.

One of the first studies that looked beyond the alcoholic woman was conducted by Baumohl and Miller in Berkeley, California, in 1974.²¹ They observed that there was a substantial presence of women among the homeless in that city, larger than had been found in comparable studies of the homeless. Their report pointed out several differences between men and women of the street. The women are younger, less educated, away from home for shorter periods of time, and they more frequently obtain income from legitimate sources. Despite the fact that more women than men receive either public assistance or money from home in order to survive, many are forced to panhandle, deal drugs, shoplift, or become prostitutes. This homeless style of life, hazardous for anyone, holds acute dangers for women, rape being high among them. The study reported that most women trade sexual favors for food, shelter, and other necessities, and it described frustrated desires for conventional monogamous relationships and intense conflicts following coercive sexual encounters.

A 1982 study of vagrant and transient women in Columbia, South Carolina, reported that the study sample was predominantly Caucasian, forty years of age or younger, natives of South Carolina, and none having more than a high school education. The majority were not employed, and most had incomes of less than \$3,000 per year.²² An important distinction between this study and previously cited ones is that it encompassed a broader environment than skid row and did not specifically focus on alcoholism. In relation to problems perceived by the study sample, the majority were dissatisfied with their present lives and identified as their most serious problems lack of money, nowhere to live, unemployment, separation from family, lack of friends, and illness. The majority who were sick sought professional care in health clinics. Most respondents hoped to be employed and have a place to live within one year.

This study also produced findings that significantly differed from previous descriptions of disaffiliation. One was that although the study sample complained of loneliness and isolation, there was a greater sense of affiliation than in earlier studies. Another finding pertained to the use of services: the majority of the sample received meals from a women's shelter and had sought help from social service agencies, but a sizable minority had not sought such help. Most services used by the study sample were general or lay community oriented rather than specifically designed to meet the needs of women and, in particular, homeless women.²³ This suggests that homeless women may only turn to shelters when other social services are unavailable.

In a survey of 100 first-time applicants in 1979,²⁴ the Vera Institute of Justice has produced the most detailed study of user characteristics of the New York City Women's Shelter. The demographic data closely

parallel the men's shelter population and disclose that: (1) half of the women were under forty, with 16 percent sixty years and older; (2) 40 percent were white, and 44 percent were black; and (3) 61 percent had lived in the city for at least one year.

The most useful data from the Vera Institute Study for application to the design of services and preventive measures are those citing reasons for selecting shelter. Of those women who gave information on prior residence, 13 percent had come directly from hospitals. Nearly half had lived in single rooms in hotels immediately prior to coming to the shelter. Over a fourth of the first-time applicants cited as the reason for seeking shelter illegal lockouts or evictions, or ejection from a household (by family or friend).

The question of who the homeless women are cannot be completely answered without considering how they are portrayed. Earlier research reinforced by popular notions, supported views of homeless women as derelict eccentrics who choose their life-style. The persistent denial of women's existence on skid row only served to consolidate long-held beliefs that homeless women are even more derelict and eccentric than homeless men, and thus the most socially undesirable of all marginal people. Equating the term derelict with homelessness has contributed to a belief that this is a "less needy" population. Because women have been less visibly homeless and less troublesome or feared than men, society and social agencies have regarded them as even "less needy" than homeless men. As a consequence, these unacknowledged women have tended to fall between the threads of the safety net, into the streets.

A personal testament to this notion has come from Jill Halvorsen, director of the Downtown Women's Center in Los Angeles, who reports that she always perceived skid row as being only for men. During her ten years first as a public welfare caseworker and then as a caseworker in alcoholic rehabilitation programs, she saw women sleeping in parking lots, in X-rated movie houses, and in roach-infested cheap hotel rooms. She discovered that women were on skid row, but that all of the agencies on Los Angeles' skid row were geared to serve men, not women.²⁵

Images portrayed in the popular press appear to be changing. The tendency to blame the victim and the notions of dereliction and eccentricity are fading. At a conference in Orange County, California in August 1982, conferees attested to the fact that homelessness is not confined to large cities. It is a national problem that reaches the smallest communities as well. Estimates that there are 4,000 homeless women in Orange County bear this out.²⁶ As Orange County and other communities across the nation are witnessing the increasing numbers of homeless single women and homeless women with children, there is an increasing awareness that these women are the by-products of the

"feminization of poverty," often the result of family breakdowns through divorce, desertion, and abuse that have led to mortgage foreclosures or evictions for nonpayment of rent.

Implications for Social Work Practice

The growing population of homeless women holds immediate and far-reaching implications for social work practice and for the design of effective social services. With the exception of a loosely organized system of emergency shelters, little exists among traditional and alternative service agencies to meet the special needs of this population. The prospect of starting from the beginning to tackle this social problem is especially daunting in an atmosphere of declining resources, but to do so is imperative. We need a system that goes beyond emergency shelter to provide food, services, and a range of living facilities to meet the varied but basic needs of the wide spectrum of women who are now homeless. And to meet this urgent need it is necessary that preventive activities include political and economic elements. However, the formulation of any systematic and comprehensive plan must take into account the strengths and weaknesses of the programs for homeless women that currently exist and assess their potential as effective answers to this serious problem.

The current programs for homeless women appear to have four characteristics: (1) they are predominantly under private auspices, (2) they are proportionately fewer than those available for homeless men, (3) there are fewer professional social workers or other professionally trained people directly involved in staffing women's shelters, and (4) existing shelters for women tend to operate with lower standards of care than those for men.

Until very recently, there were 800 beds in Los Angeles' skid row for homeless men, but only two for women. Now there are thirty-five beds for women.²⁷ Similar patterns prevail throughout the nation, suggesting a woeful failure to serve the population of women in need of shelter. It is likely that life for many women outside the shelters is worse, but it may also be possible that the prevailing substandard conditions in many women's shelters makes life on the street more attractive. Rebecca Smith believed this.

New York City now has four public shelters for women. Four years ago, it had one.²⁸ New York City is notable for operating public shelters because of the court decree requiring the city to provide meals, clothing, and beds; social and medical services are limited. The admissions procedures are more stringent than those for men in public shelters.

At intake a delousing shower is required, just as it is in shelters for men, along with an inventory of all belongings and evidence of psychiatric clearance from Bellevue Hospital. Gynecological exams are required by two of the shelters.

Whatever their bed capacity, shelters are overcrowded, and they accommodate more women than there are beds by filling hallways, chairs, and even using table tops. Facilities are adequate according to certification standards, but these standards are low. In one such shelter, Bushwick Annex, investigators found substantial fire code and food handling violations, inadequate toilet facilities, overcrowding, and inadequate staffing and security. These shelters tend to be located in fringe areas of the city, surrounded by dangerous and isolated neighborhoods where the women seeking the shelter are constantly harassed. Two of the shelters provide meals, but not on their premises. The women are transported by bus to another shelter for breakfast; they remain in the second shelter until they are bused back at night to sleep.²⁹

New York City is an exception: most cities are not legally required to provide shelter. More typically, cities operate programs like Sundown in Los Angeles County. Sundown provides a list of hotels that will put people up for the night or a weekend. The program sometimes provides food, but essentially arranges one night's support for which transients do not qualify. Sundown staff report a growing demand. Approximately 1,300 people called the program asking for food and shelter in 1981. During the first few months of 1982, the calls averaged 1,400 a month and are expected to increase.³⁰

Throughout the nation, the main source of refuge for homeless women consists of private nonprofit shelters. Public shelters that operate outside of New York, as in Washington, D.C., are restricted to men. On the whole, the private shelters are sponsored by organizations such as the Volunteers of America, churches and missions, and groups of concerned individuals. The Traveler's Aid Society, Salvation Army, and the Young Women's Christian Association also provide services, but these tend to be confined to the provision of food, drop-in centers, and travel arrangements home.³¹

There are two types of private shelters—the smaller, more casually run operation, and the longer-established institutions deeply rooted in mission work. Shelter provisions in the missions are characterized by intake and admissions procedures similar to those of public shelters. Waiting lists are common and rates are not cheap. Monies are taken out of Supplemental Security Income checks, and psychiatric care is often required of residents. Conditions vary among the missions but closely resemble those of the public shelters.

The more casual programs that prevail in the private sector attract full occupancy, primarily because they are smaller and offer a more

humane and dignified quality of care according to most shelter residents. Operating costs are met by donations, voluntary labor, and contributions of clothes, furniture, and food. Social workers, psychologists, and psychiatrists are involved only peripherally on a consulting or emergency basis in most of these programs. Generally, these shelters are informal and stress the dignity and privacy of residents, many of whom are known only by first names. Many of the volunteer staff are residents of the shelters. A Catholic church in Boston's Pine Street has turned its basement over to a group of volunteers who operate a shelter there and have moved from their homes to live in the shelter. Some of these people have donated the proceeds from the sales of their homes to operate the shelter.³² Social life is encouraged in these shelters, and it is known that strong bonds often develop among shelter residents, particularly in the less formal facilities. Because of their religious auspices, religious relics are seen everywhere. Religious services are held, but attendance is generally not required. Many of the shelters will accept no public funding, even when offered, because of their distaste for regulations and bureaucracy.³³

Physical conditions in these private shelters vary. Some provide only mattresses on the floor, but the emphasis on human dignity and patience appears to compensate for less than adequate standards. An added advantage of many of these shelters is their connection to other services, such as religion-affiliated hospitals. They also operate as a network in some cities so that homeless women can be found by their families. There is reason to believe that women tend to prefer these smaller, casual shelters to the public shelters because of their nonjudgmental ambience as well as their less restrictive policies and practices.

The Christian Housing Facility in Orange County, California, provides a unique service for families. It offers temporary shelter, food, and counseling. Priority of services goes to families or victims of family violence. In 1981 this facility had 1,536 residents, a 300 percent increase from the previous year. The main facility is a remodeled house, but motels are used in emergency cases. This shelter views its function as that of helping people return to permanent housing. Residents are required to submit to counseling and search for jobs. Once they are hired, residents pay 10 percent of their salary to the house. According to its 1980 annual report, 504 persons, 103 of these children, left with a home, a job, and an income after an average twenty-day stay.³⁴

Christian Housing is an example of a shelter designed to help people in transition. Its model of service differs from that of the mission and informal church settings in that it works with those people who are most capable of independent functioning rather than the "down and out."

Most night shelters provide little in the way of day services, and so, even with a meal and a bed, street life remains a reality for most of

the homeless people who turn to such facilities. Drop-in shelters providing other services are beginning to emerge.

The Downtown Women's Center, opened by Jill Halverson in Los Angeles' skid row four years ago, is a prototype of drop-in centers. It is a former sheet metal shop that is now a bright and cheerful daytime drop-in center for as many as fifty homeless women a day. At the center the women can shower, eat a hot meal, and nap on one of four daybeds. A sense of community is fostered. A senior consulting psychiatrist from the community services division of Los Angeles County's Department of Mental Health who has studied and cares about the plight of homeless women visits the center regularly. He provides a range of services for the women, from individual therapy to group sessions and informal rap groups. The type of care given at the center departs from most traditional notions of what constitutes good psychiatric care, and there is a sense that no rules apply to therapy with homeless women except that they will respond positively when they have a sense that they are in a supportive environment where staff are patient, caring, and respectful. The director of the center possesses no professional training or qualifications and will not accept public funding. She does, however, accept offers of help from private individuals and groups.

In New York City, the Antonio G. Olivieri Center for Homeless Women opened in February 1981 as a daytime drop-in center for homeless men and women. However, male applicants so far outnumbered female applicants that the services were redirected to women only.³³ This center offers meals, showers, delousing, assistance with income entitlements, and access to medical and social services. Women are not required to give their names, nor are they obliged to take part in any activities. The center is open twenty-four hours daily, every day, and offers a form of shelter without beds. Women sleep on chairs, the floor, and desk tops. Tolerant and caring staff make this overcrowded understaffed, and chaotic center a secure environment for women. Because of the high demand on the center, it has established a time limit of two weeks of continuous care, after which women are assured of seven days' lodging in the public shelter. They may then return to the Olivieri Center for another two weeks.

In addition to night shelters and drop-in centers, outreach services are expanding to deal with homeless people. The Manhattan Bowers Project sends out mobile vans with workers to locate homeless people and offer them food, shelter, and clothing.³⁶ Responses to such outreach programs vary. Center workers made every possible attempt to bring Rebecca Smith into care, but she refused.

As the number of homeless women continues to increase and the reasons for their plight extend beyond mental illness and alcoholism women are turning to shelters that in the past they might have turned

away from, or not sought at all. Some women who are homeless because of mental illness or alcoholism have tended to avoid shelters and escape from the rigors of mental hospitals and detoxification centers. This was Rebecca Smith's case history. The new homeless women who are increasingly in this plight for reasons related to unemployment, poverty, eviction, and abuse appear to be more accepting of social services and shelters.

What is clear from this survey of shelters and services for homeless women is the fact that public shelters operate under restrictive and demeaning policies and practices. Women prefer the private shelters and, among these, choose to be in a small and informal setting, no matter its conditions, rather than the more institutional missions with characteristics of public shelters. The overcrowding in all shelters dispels the myth that women choose life in the streets. Most women want shelter, but given the scarcity of private shelters and the harsh conditions of public and mission facilities, it is understandable why many homeless women continue to find themselves without any place to sleep at night.

A Comprehensive Service System for Homeless People

The evidence from drop-in centers, churches, missions, public shelters, and outreach efforts demonstrates the need for additional and better-quality shelter. Most programs presently operating are, at best, temporary and do not begin to approach the full dimensions of the problem.

Rational planning to meet the needs of homeless people in general, and homeless women in particular, must take into account the heterogeneity of the population and provide a range of housing and services. Some advocates for the homeless have proposed a three-tiered approach to the development of housing and services: (1) emergency shelter and crisis intervention, (2) transitional or community shelters, and (3) long-term residence.³⁷ Each would incorporate a cluster of elements, identified briefly below.

The *basic emergency shelter*, the first tier of shelter, should be made as accessible and undemanding as standards of hygiene and security allow. Clean bedding, wholesome food, adequate security and supervision, and social services should be available. Existing facilities such as school buildings, churches, armories, and converted houses could be adapted for such purposes. Each shelter should be community based as opposed to being in physically or geographically isolated locations.

Transitional housing would recognize that there are homeless people who, given the opportunity and supports, could eventually live independently. This type of shelter would make more demands on residents in terms of assuming self-responsibility and would provide long-term social services and vocational rehabilitation. Staff would actively attempt to secure appropriate entitlements as well as necessary clinical care. Transitional housing settings could provide an address enabling residents to receive public assistance.

Long-term residence in effect would provide homes and offer services and aids necessary in the everyday lives of residents. The broad scope of such a program, incorporating aspects of low-income housing as a full complement of service personnel, does not make it a realistic prospect in today's political climate. Nonprofit sponsorship of such programming is more feasible than public funding and support.³⁸

An outstanding example of such a three-tiered approach is the Skid Row Development Corporation in Los Angeles. Formed in 1978, the corporation is funded through private (the Los Angeles Central Community Association) and public sources (the Los Angeles Community Redevelopment Agency), but its goal is to be independent from city and county funding. Starting with a first-year operating budget of \$95,000, after two years it generated an operating budget of \$300,000, and the figure is growing.³⁹

The primary service objective of the corporation is to provide an alternative housing resource to emergency shelter on skid row, recycling apartments in south central Los Angeles. The corporation has designed transitional housing for indigent women and men. The Women's Transitional Housing Program calls for a separate building apart from its men's facility. Plans are under way for the completion of long-term housing, and the corporation has planned a series of projects to relocate and rehabilitate apartment buildings slated for demolition in various parts of the city and county. Those who do well in transitional housing will be priority tenants, and the remaining units will be rented to individuals and families needing affordable housing.

Ballington Plaza opened in July this year under the auspices of the Skid Row Development Corporation and is practical proof that long-term housing for the homeless population can be developed and funded where there is the interest and will to do so. This 270-unit housing complex located in Los Angeles' skid row is intended for low-income men and women who are elderly or handicapped and neither drug nor alcohol-dependent. It offers the first real alternative to sleeping in the streets, transient hotels, or run-down missions. Rents range from \$95 to \$155 per month. It has full security, cooking facilities, and is an attractive three-story yellow stucco building with bay windows and a large central courtyard with grass, benches, and a parklike setting. This is a prime example of a suitable facility: it is the first in the nation

to provide permanent housing for the homeless population. Most programs continue to be confined to the provision of temporary shelter, and many have time limits on the length of stay

Recommendations for Policy Changes and Social Action

The underlying causes of homelessness show every sign of persisting, and the dimensions of the problem are increasing. Structural unemployment, inadequate and insufficient community-based psychiatric care, housing scarcity, domestic violence and abuse, and the recent cutbacks in income maintenance programs and social services are intensifying it. Given a confused and confusing political climate unsympathetic to the needs of the more vulnerable people in the country, it is difficult to gauge the prospects for a more enlightened public policy toward the homeless population in general and for bringing greater balance to providing for homeless men and women. There are hopeful signs, however, that the public is beginning to understand that the roots of mass homelessness lie in the pathology of society, not of individuals. There is increased public sympathy for the homeless and for their need for more adequate shelters. This is evidenced by the rapid rise of advocates for homeless people. Coalitions on behalf of the homeless are springing up throughout the nation—in Boston, Denver, Portland, Seattle, Los Angeles, New York, and Philadelphia. A National Coalition for the Homeless has begun to provide an active lobby and information resource for homeless people and their advocates.⁴¹ The leverage that these advocacy groups can muster at local and national levels in the courts, legislatures, and social agencies is critical in improving the lot of the homeless as well as reducing their numbers.

An important event, already mentioned, occurred in New York in 1981 when the Consent Decree settling the *Callahan v. Carey* case was signed and forced New York City to open more shelters for men and, indirectly, women. A subsequent court action was initiated when, on February 24, 1982, a class action suit, *Eldredge v. Koch*, was filed in New York State Supreme Court on behalf of homeless women in an effort to upgrade and expand shelters. The suit contends that the conditions in the public facilities effectively deter many homeless women from applying for shelter.⁴² Resorting to the courts is a powerful tool that other cities and states have not utilized enough with respect to homeless women. Even though public shelters do not adequately deal

with the needs of the homeless population, with the courts' help, these may nevertheless be a powerful beginning to securing entitlement shelter

Many of the existing coalitions are actively attempting to educate the public about the homeless population and to dispel the many negative stereotypes, attitudes, and myths about them. This is an important strategy, and there have been discernible changes in public views of the homeless. In addition to securing improved shelter, changing attitudes, and legal action, advocates of the homeless must direct their energies toward changing policies in several areas mentioned below.

1. Every effort must be made to ensure a quantitatively and qualitatively adequate supply of emergency shelter and to apply equal standards to shelters for women and men. New York Governor Mario Cuomo's budget of \$50 million to build or remodel 6,000 units of housing for the homeless is an example for other states

2. Shelters should be accessible to the target population, and then admissions procedures should be simple. Shelters should be community based, in contrast to policies operating in some cities that support physically isolated shelters.¹⁵

3. Community efforts to develop transitional and permanent housing and vocational rehabilitation modeled on the Skid Row Development Corporation in Los Angeles should be undertaken and supported

4. The diminishing rate of single-room occupancy hotels, despite their problems, should be reviewed. Cities and counties should drop tax incentives for conversion of these hotels. Despite their adverse conditions, single-room occupancy beds are at a premium, and many people consider themselves fortunate to obtain and keep them. Departments of welfare should, however, implement programs that would guarantee that monthly checks go directly to beneficiaries, rather than the hotel owners.

5. Departments of mental health and mental retardation should expand their outreach programs so that their links with homeless people can precede—and possibly preclude—police intervention. Increasing the number of mobile vans, drop-in centers, and crisis-intervention provisions would be steps in this direction. Outreach effort also need to provide clinical certifications necessary to obtain Supplemental Security Income and Disability benefits, for which some homeless men and women can only qualify once they obtain a residence. Staff of the Skid Row Project sponsored by the Los Angeles County Department of Mental Health have conducted training sessions for agencies that serve the homeless to inform their workers about the details and requirements for obtaining such benefits. Preliminary reports indicate that there was a 90 percent increase in the number of homeless people receiving such benefits in 1982 since these sessions took place

6. Cities and states, along with private agencies, should be encouraged to build or convert facilities so that there are adequate supplies of transitional and permanent affordable housing.

7. Support for legislation to prevent further erosion of the single-room housing stock and illegal evictions or lockouts is needed. The Gottfried-Calandra anti-lockout and illegal eviction bill would allow city police in New York to intervene on the tenant's behalf when they are illegally locked out or dispossessed from their homes.¹¹ This bill can serve as a model for other cities.

8. Mental health agencies and health settings can redirect some of their programs to meet the needs of homeless women in spite of reduced operating budgets. This would include revised practices and increased support services related to deinstitutionalization. Recent policies that direct mental health services toward chronic mental illness provide the legal framework for developing these services.

9. The public assistance allowance should be raised to account for inflation. Unless this happens, homeless people who become ready to assume independent households will not be able to afford the necessary rents and the tide of building abandonment will continue.

There is evidence that public curiosity, sympathy, and genuine concern for the plight of homeless men and women are increasing. Examples of well-run supportive services for this population are also on the rise in communities throughout the country. But the comprehensive programming based on the three-tiered approach that offers a range of housing and linkages to services and a sense of community is seldom seen.

As the ranks of the homeless increase, and the numbers of women within those ranks rises, concerted and planned action must be taken to develop policies and programs that will prevent another Rebecca Smith from dying in her cardboard home.

Notes

1. *Washington Post* (February 4, 1982).

2. *Callahan et al v Carey et al*, Index No. 42582/79, Supreme Court of the State of New York.

3. These data were reported at a conference sponsored by the National Conference on Social Welfare (The Homeless: An Action Strategy, Boston, April 28-29, 1982).

4. *Ibid*.

5. *Ibid*.

6. Ellen Baxter and Kim Hopper, "Private Lives/Public Spaces: Homeless Adults on the Streets of New York City," mimeographed (New York: Community Service Society of New York, February 1981).

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7. Rodger Farr, "The Skid Row Project," mimeographed (Los Angeles: Los Angeles County Department of Mental Health, June 1982)
8. *Los Angeles Times* (July 11, 1982)
9. Baxter and Hopper, pp. 30-48
10. Vera Institute of Justice, "First Time Users of Women's Shelter Services: A Preliminary Analysis," mimeographed (New York: Vera Institute of Justice, 1981)
11. Jennifer R. Wolch, "Spatial Consequences of Social Policy: The Role of Service Facility Location in Urban Development Patterns," in *Causes and Effects of Inequality in Urban Services*, ed. R. Rich (Lexington, Mass.: Lexington Books, 1981).
12. U.S. Bureau of the Census, "U.S. Poverty Rate, 1966-1981"
13. *Ibid*
14. Los Angeles County, Department of Public Social Services General Relief Regulations, Regulations 40-131, Determination of Eligibility. Section 3.31 requires the following identifying information: proof of identity, social security number, proof of residence, statement of intent to continue living in Los Angeles, and proof of U.S. citizenship. Regulation 40-119.2 states that general relief applicants are to be referred to the district office where they first appeared to request aid. Interim relief can be given if the applicant possesses an affidavit from a salaried employee of a board-and-care facility, alcoholism recovery home or detoxification center, or a recognized community agency within Los Angeles County. These regulations are prototypical of general relief regulations throughout the United States and serve as deterrents to homeless people who seek public assistance.
15. These data were first reported by Rodger Farr and Kevin Flynn, who directed the Skid Row Project of the Los Angeles County Department of Mental Health in June 1982.
16. Anne Minahan, "Social Workers and Oppressed People," *Social Work* 26 (May 1981): 183-84.
17. Gerald R. Garrett and Howard M. Bahr, "Women on Skid Row," *Quarterly Journal of the Studies of Alcohol* 34 (December 1973): 1228-43, and "The Family Backgrounds of Skid Row Women," *Signs* 2 (Winter 1976): 369-81.
18. Judith A. Strasser, "Urban Transient Women," *American Journal of Nursing* 78 (December 1978): 2076-79.
19. New Orleans Traveler's Aid Society, *Flight Chronic Clients* (New Orleans, 1980).
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21. Jim Baumohl and Henry Miller, "Down and Out in Berkeley" (report prepared for the City of Berkeley, University of California Community Affairs Committee, May 1974).
22. John F. Gandy and Leonard Tartaglia, "Vagrant and Transient Women: A Social Welfare Issue," mimeographed (report prepared for the National Conference on Social Welfare, Columbia, South Carolina, May 1982), pp. 6-8.
23. *Ibid*, pp. 13-16.
24. Vera Institute of Justice (n. 10 above).
25. This was reported in personal interviews with J. Halverson during the spring and summer of 1982.
26. This estimate was reported at a conference on homeless women in Orange County, California, August 1982.
27. Rodger Farr, "The Skid Row Project" (n. 7 above), and "Concerned Agencies of Metropolitan Los Angeles Directory of Services for the Homeless," mimeographed (Los Angeles, December 1982).
28. Kim Hopper, Ellen Baxter, Stuart Cox, and Laurence Klein, "One Year Later: The Homeless Poor in New York City, 1982," mimeographed (New York: Community Service Society Institute for Social Service Research, 1982).
29. *Ibid*
30. *Los Angeles Times* (July 11, 1982).
31. This information is based on interviews with staff of the agencies, investigated of annual reports, and program descriptions on file with the United Way of America.
32. These data were reported at the conference in Boston, April 28-29, 1982 (see n. 3 above).

- 33 Reported at the Boston conference (see n 3 above) The Downtown Women's Center is another example of such refusal to accept public funds
- 34 Christian Temporary Housing Facility, *1980 Annual Report* (Orange, Calif: Christian Temporary Housing Facility, 1980)
- 35 Hopper et al (n 28 above)
- 36 Reported at the Boston conference (see n 3 above) by Marsha Martin, director of the Manhattan Bowery Project
- 37 D. Sakano, "Homeless New Yorkers: The Forgotten among Us" (testimony given at the New York State Assembly hearings, November 19, 1981)
- 38 Hopper et al (n 28 above)
- 39 Skid Row Development Corporation, *Annual Report, 1979-1980* (Los Angeles: Skid Row Development Corporation, 1981)
- 40 Ibid.
- 41 The National Coalition for the Homeless is based at the Community Service Society of New York
- 42 Eldredge et al v Koch et al, in pretrial discovery process at the time of this writing, Supreme Court of the State of New York
- 43 *New York Times* (February 11, 1983)
- 44 New York Senate, Illegal Eviction Law, 1982, Introduction 3538-B, Amendment to Multiple Dwelling Law of New York, Proposed Amendment Section 302-D

Research and Innovation in Social Work Practice: Avoiding the Headless Machine

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Practitioner involvement in research has been important historically in social work. In their day-to-day contact with clients, practitioners have the opportunity to acquire knowledge and develop perspectives about the nature of social problems and the utility of various intervention strategies. Their experience puts them in a valuable position to contribute to social work knowledge. This paper explores several premises inherent in current discussions of research and practice that may interfere with practitioner involvement in research. Additionally, the paper describes specific strategies likely to increase practitioners' capacity to contribute to social work knowledge.

"If social research is to go on, it can only develop scientifically with the help of well-trained social workers . . . all the investigating techniques in the world will produce nothing but a multiplication of dullness unless those who are doing the work have a keen understanding of the problems that are to be solved. Otherwise the investigator is a *headless machine*."¹ Edith Abbott, a founder of the School of Social Service Administration at the University of Chicago, placed social work practice at the center of the social research enterprise. Historical evidence reveals that other social work pioneers were in agreement with Abbott about the relation of practice and research in social work.² They believed

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that social work research should address concrete problems and should not be justified solely because it advances knowledge. Second, they felt that social work research had to be conducted by social workers who were familiar with clients and service delivery systems, and should not be left to social scientists alone. They also believed that social workers should see themselves as individuals whose experience could add to the field's knowledge base. And finally, they were adamant that subjective concern about a problem informed rather than distorted the research. On this last point Edith Abbott said, "Some of our social science friends are afraid that we cannot be scientific because we really care about what we are doing and we are even charged with being sentimental. Now this does not frighten me . . . the social worker may care very genuinely about what happens to the unfortunate child or the broken family for whom she is temporarily responsible without being less scientific."³ The evidence indicates that early social workers in Chicago had a strong empirical orientation toward their task. Further, although they shared this orientation with the emerging social sciences, they distinguished themselves in terms of their pragmatic focus and their involvement in the subject being studied.

About the time that Edith Abbott and her colleagues were describing the importance of practitioner involvement in research, a practitioner in another field was producing a concrete example of the value of practitioner involvement in the research process. In 1905, a New York gynecologist, H. N. Vineberg, was surprised to discover that one of his Jewish patients had cervical cancer. He was surprised not by the fact that the patient had cervical cancer—many of his patients did—but rather because the patient was Jewish. Although the factors he knew to be associated with the disease—poverty, early marriage, and multiple pregnancies—were common in the crowded Jewish ghettos of New York at that time, it was his experience that his Jewish patients seldom developed cervical cancer. A practitioner who kept meticulous records, he checked them to test his impressions and found that cervical cancer was twenty times more frequent in his non-Jewish patients than in his Jewish patients. He identified three factors that may have accounted for the low incidence of the disease among Jewish women: the religious diet, heredity, or the Jewish custom of sexual abstinence during a woman's menstrual period. It turned out that the third factor, sexual relations, was an important clue. Subsequent research built on his findings, and by 1966 the evidence linking the herpes-2 virus (transmitted by sexual relations) to cervical cancer was relatively conclusive. Substantial research led to this important discovery, but the initial insight was traced to a practitioner who kept careful records. Although he was a medical rather than a social work practitioner, Vineberg's contribution provides a useful perspective when we consider the relation between social work research and practice.⁴

Problematic Premises in Empirical Social Work Practice

Historically, the focus of social work research has been twofold. First, it has been on achieving an understanding of the social problems and processes that are the targets of social welfare policies and programs. This research may be aimed at documenting the existence of unrecognized social problems or at providing new ways of conceptualizing and explaining previously identified problems. The early British surveys of social problems, such as Charles Booth's seventeen-volume *Life and Labour of the People of London* (1891–1903), are early examples of this research genre. The second focus, with a somewhat shorter history, has been on understanding the nature and effects of social welfare programs and policies. An early example of this focus appeared in 1924 in a work by Sophia van Senden entitled *How Foster Children Turn Out*. This study examined adults who had spent a year or more in foster care in New York State.⁵ Particularly in the last twenty years, a concern with evaluation of social work interventions has dominated social work research.

Despite the early emphasis on practitioner involvement in research, social work practitioners have profited primarily from research conducted by others. Social work researchers or researchers in other fields have investigated the nature and extent of social problems and the capacity for certain social interventions to resolve them. However, although research and practice have been treated as separate enterprises in the field, recognition of the importance of practice insights to social work research remains. Norman Polansky provides the basic justification for valuing practice knowledge in research when he says, "... the university has served the profession typically as a repository and transmitter of knowledge rather than as a generator of it. Most that is new comes from those on the firing line of direct practice."⁶ He goes on to say, "... there are many areas of social work research in which it is necessary to be a practitioner in order to sustain creativity. It is nearly impossible to come up with advances in treatment tactics which are both imaginative and realistic when one never sees clients."⁷ Recent developments such as single-case experimental methods and automated information systems have allowed practitioners to participate more directly in research through the monitoring and evaluation of their own practice.⁸ These developments are consistent with the research tradition in social work that places value on practice-derived insights and information.

Despite historical tradition and recent developments, however, an empirical orientation has been embraced with some ambivalence in

social work.⁹ There has been concern about social workers' "negative attitudes" toward research and their failure to use research in their practice.¹⁰ And while some authors have lamented the marginal status of research in social work practice, others have debated the relevance of the "objectivist" tenets on which it is based.¹¹

Furthermore, a review of the current literature reveals several premises that are inconsistent with the rich tradition and emerging developments of research in social work—indeed, they are more consistent with the image of the "headless machine." These premises stand in the way of the knowledge-building process that will be discussed in the last half of the paper. Four such premises are identified and discussed below.

Research related to practice based on different theoretical frameworks raises different methodological issues or requires different research strategies—This premise is most often found in discussions of the difficulties of evaluating the effects of practice based on psychosocial versus behavioral theories. For example, Judith Nelsen recently discussed the "special . . . methodological issues that arise when nonbehavioral practitioners attempt to undertake research on a single case."¹²

A major misconception inherent in this premise is that practice interventions guided by different theoretical frameworks are distinct. This misconception is related to an understanding of the nature of the relationship between theories that explains how and why change occurs, and intervention strategies or practice procedures employed to bring about change. There is a tendency in the literature to assume that practice procedures are distinctly identifiable with one or another theoretical framework. For example, Nelsen labels procedures "behavioral" when they incorporate clearly specified treatment goals and intervention approaches. She labels procedures "nonbehavioral" when they are "not well-delineated," "not easily definable at the level of either concept or process," or do not include "a set of interventions [that] will have an immediate and measurable influence on a particular long-term goal."¹³ Inherent in the tendency to identify procedures with particular theories is a failure to articulate the relation between theories and procedures. It has already been noted that the primary purpose of a theory is to help understand or explain a problem. Intervention procedures, on the other hand, are designed to resolve the problem. As has been discussed elsewhere,¹⁴ an adequate understanding of a problem does not necessarily lead to an effective resolution of it. It is often possible to resolve a problem without fully understanding it.

The relation between theories and intervention strategies is illustrated when we consider how intervention strategies are developed. Clearly, some intervention strategies follow from general theories of human behavior. For example, interventions aimed at helping clients achieve insight into their feelings about important life events are derived from a theoretical view that historical life events are the most important

determinants of behavior. Alternatively, interventions aimed at helping clients learn to reinforce the prosocial behavior of their children are based on a theoretical view that immediate environmental stimuli are the most important determinants of behavior. Often, however, intervention strategies and practice procedures are atheoretical in that they are derived from a translation of techniques from other fields or from the practical experience of practitioners or clients.¹⁵ Therefore, practice procedures and social intervention strategies frequently do not evolve directly from global theories of human behavior.

Additionally, practitioners from a variety of theoretical frameworks recognize that there are, indeed, common practice strategies that cut across orientations.¹⁶ A study by Fred Friedler as early as 1950 documented similar therapeutic activities carried out by therapists from three different frames of reference.¹⁷ More recently, Klein, Dittman, Parloff, and Gill¹⁸ as well as Wachtel¹⁹ suggest that there are common observations about effective intervention strategies shared by several frames of reference.

In summary, the application of a particular theoretical orientation for understanding a problem may have little bearing on procedures used to resolve the problem. There is increasing evidence that experienced practitioners operating from different frames of reference may, in fact, engage in similar practice activities. Given the commonalities among practice procedures used within different theoretical frameworks, the utility of attempting to identify research strategies distinctly identifiable with one or another theoretical framework is questionable.

Outcome research is more useful than other types of research.—A review of the literature shows that intervention evaluation to date can be characterized by its emphasis on what a recent report from the Office of Technology Assessment²⁰ on the effectiveness of psychotherapy calls efficiency evaluation rather than effectiveness evaluation. Efficiency analysis assesses the benefits of a program or intervention under ideal conditions of use, whereas effectiveness evaluation examines the program under average conditions of use. Efficiency evaluation includes emphasis on unequivocal establishment of cause whether or not the conditions for analysis are at all representative of practice situations. Consistent with Campbell's idea of the experimenting society,²¹ major social welfare research of the 1960s and early 1970s emphasized the social experiment with its focus on causal inference or internal validity. The Negative Income Tax experiments,²² the Girls at Vocational High experiment,²³ and the Manhattan Bail Bond project²⁴ are examples. This emphasis can be found in the emergence of experimental single-case studies in the evaluation of direct-service delivery. In other words, the focus of evaluation research on policy and practice has often sacrificed concerns of external validity, the general applicability of findings, for those of internal validity, the scientific integrity of findings.

Consistent with this trend is the suggestion that developmental research may be the "single most appropriate model of research for social work."²⁵ Developmental research is described as a stepwise procedure for using relevant information for creating and testing new social work technology. Indeed, it is true that the focus on the articulation and evaluation of social intervention strategies has been the basis for progress in social work research in the last twenty years. There have been important gains in the development of technology as well as of research designs and practice procedures necessary for increasing the internal validity of evaluations of the innovations.²⁶ And Edwin Thomas²⁷ is quite correct in suggesting the importance of continuing in this direction in the future. In fact, there is substantial evidence, such as the increasing relationships between university research centers and industry, that scientific activity in general will increasingly focus on technology development.²⁸ Nevertheless, to focus social work research efforts primarily on determining the efficiency of various intervention technologies will have disappointing consequences in the long run. There are at least two reasons for this.

First, as noted previously, two types of knowledge have been important to social work historically. The first is descriptive and understanding-oriented. The second is evaluative and change-oriented. Descriptive knowledge in social work is information relevant to the understanding of social problems as well as to the understanding of social processes, for example, how organizations work, how information is processed, and how individuals grow and develop. Change-oriented knowledge, including developmental research, focuses on assessing the impact of specific interventions or technologies. Despite the recent emphasis on developmental research, descriptive knowledge remains important to social work practice. The problems with which social workers deal are problems deriving from constantly shifting economic, political, and social forces. Social work research has an important role to play in the identification and definition of social problems. To focus only on assessing the impact of social intervention is to ignore the task of assessing the nature of social problems and their pervasiveness in the population. Social workers have an important perspective and substantial experience to offer in the areas of problem definition²⁹ and problem assessment.³⁰ As a result of their street-level familiarity with social problems and direct experience with human needs, social workers bring an important view of reality to the politics of problem definition and assessment.

An additional reason why social work research focused primarily on outcome research will be disappointing is that different types of information or knowledge are useful depending on (1) the developmental stage of the program being evaluated, and (2) the organizational role of the user. Cronbach and his associates³¹ suggest that process evaluation is most relevant to new and ongoing programs and that

outcome evaluation is most useful for one-shot testing of model or demonstration programs. Further, they show that outcome research is of greatest value for policymakers; program administrators and local operating personnel are more concerned with evidence related to the efficiency of daily program operations. In other words, the value of various types of research depends on the extent to which the program is developed.

Edward Suchman was among the first to point out that social programs go through several stages of development relevant to evaluation, including (1) a pilot stage in which components of the program are introduced on a trial and error basis, (2) a model stage in which a fully developed program should be evaluated rigorously for effectiveness and (3) a prototype stage in which the program can be monitored in a variety of settings.³² Although Suchman was describing the development of programmatic interventions, similar stages can be identified in the development of practice procedures or technologies for interventions on an individual level. Whether on a programmatic or individual level, intervention innovations have different objectives at each stage of development and require somewhat different evaluation designs at each stage. At the earliest stage, it is important to monitor progress as various components of interventions are introduced or withdrawn. At the model stage, experimental research techniques are required to assess as clearly as possible the causal relation between the intervention and program outcomes. Finally, as a program is disseminated and implemented in a variety of settings differing from those of the model program, it is necessary to monitor the continuing impact of the program in these settings.

Similarly, different information is of interest to the social worker depending on his or her role within the organization. A social worker intervening with a client on an individual, family, or group basis is primarily concerned with monitoring client progress and has less concern with monitoring the causal relation between a given intervention and a given outcome.³³ Similarly, program administrators whose primary tasks are related to the delivery of services are more interested in understanding whether the program is being implemented appropriately than in documenting its impact on individual client lives. Individuals responsible for allocating resources to support particular services such as program managers or consumers are those for whom information related to program outcome and technology effectiveness has the most relevance.

In summary, the development and testing of new technologies in social work will remain an important focus for research efforts. However, the multiple roles of social workers that include conceptualizing issues and defining problems as well as delivering services (both tested and untested) mean that the information needs of social workers are not met by research on the efficiency of new technologies alone.

Practitioner research is not objective enough.—A basic issue to be addressed if we are to arrive at an understanding of the relation between research and practice is related to the level of scientific credibility practitioner research must attain. Thomas³⁴ has outlined the numerous conflicts between service delivery and scientific research that may reduce the scientific integrity of a practitioner's research efforts. Clearly, research conducted in the context of service delivery is vulnerable to a large number of biasing influences. Practitioners must often compromise the tenets of scientific inquiry in order to meet client needs efficiently, effectively, and ethically. There are two responses to these concerns. The first has been expressed by Reid and Smith. They point out that the "soft" studies conducted by practitioners can be useful when their limitations are taken into account. Further, they note that such information is much "harder" than knowledge based on untested practitioner intuitions. "Knowledge produced by research retains crucial advantages over unsubstantiated expertise. Research builds knowledge through processes that are both self-corrective and cumulative. As experience is gathered, more effective methodologies evolve. As a body of research grows, convergences in findings appear, and studies fraught with error fall to one side. Moreover, the shortcomings of research-based knowledge are more readily identified."³⁵

A second response to concerns about the scientific tenability of practitioner research comes from analyses of the function and proper application of tenets of scientific inquiry. Progress has been made in the last decade in understanding how scientists actually do research³⁶ and what constitutes "scientific" activity.³⁷ The "paradigm shifts" of Kuhn³⁸ and the falsification logic of Popper³⁹ have legitimized the use of experience to modify theories and hypotheses.⁴⁰ The scientific method provides a standard for communicating research findings and assessing their integrity. It is a mechanism designed to facilitate—not impede—the development of knowledge.

Practitioners do not "use" research enough—Despite the recognition of the importance of practitioner insights for social work research, many social work researchers express great dismay with practitioners' participation in the research enterprise. For example, Stuart Kirk writes, "[Social workers] profess a high regard for research, but they don't like to study research; they seldom use research studies in their professional work or to improve their skills; their professional reading is not research oriented; they are not likely to conduct research after leaving school; and they have considerable difficulty accepting research with negative findings."⁴¹

Essentially, Kirk expresses a common concern that social workers do not conduct and use research enough. In all discussions of practitioners' failure to do and use research, there is a basic lack of clarity about the appropriate role for the practitioner in research. It is often claimed that the practitioner is a consumer of research. For many

years social work texts and research courses have been designed to enable practitioners to be more intelligent consumers of research conducted by social work or social science researchers. As pervasive as this model has been, it is clearly not consistent with the views of early social workers, as articulated by Edith Abbott. More recently, the practitioner's role in research has been seen as a more active one. Specifically, methods have been developed and promoted to enable the practitioner to evaluate his or her own practice. The central role of the practitioner in these research activities is more consistent with the vision of early social workers. But, even here, some authors express concern about the scientific credibility of the products of practitioners' research.⁴²

If we are to arrive at a clear view of the relation of research and practice, we must achieve a better understanding of the way information is used in practice decision making. Implicit in many discussions of practitioners' failure to use research is a rational model of decision making. This model assumes that the most appropriate way for practitioners to make decisions is to survey the existing information on a topic and to make a decision according to the most persuasive evidence.

The limited information we have on knowledge utilization suggests that decisions are made according to a quite different model. Specifically, factors such as involvement in the research and the intuitive appeal of findings are important elements in knowledge use.⁴³ Further, it is unlikely that any single piece of information will solely influence a decision. Instead, decision makers appear to put research evidence together with other kinds of knowledge. Research evidence is likely to have a conceptual rather than an instrumental impact. That is, when it is combined with other information available to the decision maker it is more likely to affect how the decision maker thinks about a problem rather than influence directly what he or she does about it.

For the most part, research in knowledge utilization has focused on federal level policymakers. We, in fact, know very little about how research is utilized by direct-service practitioners. As suggested previously in this discussion, stages of program development and organizational role of the users will influence the information needs of practitioners within the organization. Beyond that, we do not know much about the factors that influence the impact of research on practitioner decisions.

It is possible to generalize from the research on federal level policymakers and to suggest that the research-practitioner model, with its focus on practitioner self-evaluation and practitioner participation in the discovery, testing, and reporting of information, is a model that lends itself to maximizing research utilization. Practitioners are clearly involved in these research efforts and acquire a sense of ownership with respect to the findings. Further, they are conducting research on topics of relevance to themselves and other practitioners. Thus, evidence

from the process of knowledge utilization suggests that the research-practitioner model would lend itself to increased knowledge utilization. The limitations of this evidence indicate a need for research to increase our understanding of the information-utilization and decision-making processes of practitioners.

Improved Practice Decision Making

Given a sense of the past and present, in what directions should social work research move if it is to inform practice decision making? In the discussion below, three directions for research in social work are identified: knowledge generation, knowledge aggregation, and knowledge validation. Further, strategies for moving forward in these directions are delineated.

Knowledge generation.—As mentioned previously, research designed to increase understanding of social problems and processes has been a central focus of social work. Such research takes a variety of forms: social theory development and testing, reconceptualization of the nature of social problems and the factors that predict or explain them, and descriptions of the parameters of social problems and processes. Work such as Thomas's on the concept of the social role; John McCarthy and Mayer Zald's on social movement organization, Paul Glasser, Rosemary Sarri, and Robert Vinter's work on small groups, and Donnell Pappenfort, Dee Kilpatrick, and Robert Roberts's description of institutions for children⁴⁴ have been conducted by both social workers and other social scientists. Economists, sociologists, psychologists, historians, and anthropologists as well as social workers have provided substantial information relevant to the problems and issues of concern to social work.

There are, however, relatively few examples of the use of practitioner knowledge and experience to expand the social work knowledge base. This is curious since the work of practitioners places them in a unique position to understand problems and to develop realistic interventions. In their day-to-day contact with clients, they acquire a knowledge of the relation among client characteristics, problems, and the success of various intervention outcomes. This means they could contribute to our understanding of (1) the way in which problems differentially affect various groups in society, as well as of (2) useful and effective means, both formal and informal, for ameliorating these problems for various groups. In part, the failure to use information derived from practice can be attributed to the fact that very little has been

done to conceptualize ways to capitalize on practitioners' experience of problems and the relative success of various interventions.

One reason for this failure has been the cumbersome nature of data collection in practice. One resolution, however, is provided by the increasing availability of automated information systems that will make it possible to collect and store over time data related to client and service characteristics. An information system provides the capacity to aggregate data in order to address questions of the relation among client characteristics, problem types, and intervention success. In the same way that Vineberg's client files provided early insights about the cause of cervical cancer, files of social work practitioners are likely to contribute substantially to our understanding of problems. The use of practitioner-generated data for addressing important research questions establishes a research role for the practitioner that better utilizes the full range of practitioner experience.

Knowledge aggregation.—The abundance of social science information relevant to social work has led to a growing interest in strategies for organizing and translating this knowledge into relevant concepts and principles of social intervention. Concern with the validation of practice methods in recent years (actually, since Eysenck's indictment of psychotherapy in 1952)⁴⁵ has resulted in a plethora of studies attesting, with varying degrees of persuasiveness, to the value of psychotherapy and behavior-change interventions. The numbers of these studies and the diversity of their findings have led to several efforts to aggregate and summarize the results.⁴⁶

One such aggregation process, called meta-analysis, has been discussed by several authors⁴⁷ and is best exemplified by the Mary Lee Smith, Gene V. Glass, and Thomas Miller analysis of psychotherapy outcome research.⁴⁸ Essentially, the approach they used involves the computation of an average effect size for a group of studies. (The effect size is simply the standard score obtained by subtracting the mean of the control group from that of the treatment group and dividing by the standard deviation of the control group.) The effect size becomes the unit of analysis rather than the actual results of the study. Refinements of this procedure appear constantly in the literature.⁴⁹ Such summarizing statistics could be used as well by a practitioner to compile and aggregate the results of a series of his or her single-case studies. They could be used also to summarize the effectiveness of several practitioners within one agency as a means of describing program effectiveness.

The desire to make sense of the growing number of studies of various social problems is apparent also in Jack Rothman's description of knowledge transfer.⁵⁰ Knowledge transfer refers to the identification and translation of relevant knowledge to concepts and principles of social intervention. Considerable work has been devoted to understanding this process. Edward Mullen and Thomas, as well as Rothman,

have been active in specifying the nature of these activities for social work.⁵¹ Mullen and Rothman have focused on the process by which substantive research findings can be reviewed and translated into practice guidelines. Thomas has identified a procedure by which a variety of information is used for the development and testing of social work intervention technologies. Thomas's contribution stems in part from his description of the diverse sources of information relevant to innovation in social work, including technologies developed in other fields and practitioner experience and intuition. In recent years, we have seen numerous examples of the aggregation and transfer of information relevant to social intervention.⁵² Work in the areas of operant and respondent conditioning, social learning theory, and organizational theory, among others, has been translated into intervention strategies and subsequently validated through empirical work.

An additional procedure designed to facilitate the aggregation and interpretation of information relevant to a single social problem has been suggested by Caplan and endorsed by Cronbach et al.⁵³ They suggest the creation of "social problem study groups" to study problems in the broadest possible way. These groups would study information from a variety of programs and research efforts. They would be composed of individuals with a variety of perspectives, including practitioners working with the problem on a daily basis. Cronbach describes such a group as follows:

To digest knowledge from diverse sources, including program evaluations, requires diverse talents, the task is not one to be assigned to a single individual or a small group. . . . The task of the individual study group would be, first and foremost, to make the best possible sense of what informants say. The group would hear from those who conduct evaluations, preferably as their work progresses rather than at the very end, it would hear from those doing relevant academic research, it would hear from those who deal with the problem in service agencies; and it would hear from those who have ideas about new policies and interventions.⁵⁴

Although this is a less technical approach to the aggregation and translation of knowledge, it readily incorporates the experience of the practitioner and probably holds the greatest promise for identifying what is known, determining salient issues, and reshaping questions.

Knowledge validation: evaluation.—Historically, the field has attached much importance to the third direction, evaluation. In the years to come we must continue to focus on and to develop new methodological strategies for evaluation of ameliorative efforts. It was suggested previously that much of the discussion of evaluation has focused on internal validity or the scientific credibility of findings. It was suggested also that the research-practitioner relation has been conceptualized as unidirectional. The researcher has been viewed as the source of empirically

based knowledge and the practitioner as the consumer of such knowledge. Very little attention has been given to the communication in the opposite direction. These characteristics of the development of empirical practice have meant that the practitioner has played a limited role in social work evaluation research. The direction of our future work must be more bidirectional as a result of the development of practitioner-relevant research strategies. This means identifying the types of information and research methods that are useful to the practitioner.

Time-series designs and analyses hold substantial promise in this regard.⁵⁵ As a special case of interrupted time-series designs, experimental single-case designs require multiple measures over a baseline or pretreatment period followed by the abrupt introduction of an intervention that is assumed to be maintained at a constant level over time. Unfortunately, in many practice situations these requirements cannot be met.

Recently developed methods for statistical analysis of time-series data, concomitant time-series analysis, may allow these designs to become more practical for the practitioner.⁵⁶ These statistical methods allow reasonable levels of causal inference without the intrusion of a baseline or the assumption that an intervention is maintained at a constant level over time. When an intervention is introduced gradually, for example, concomitant time-series analysis can be used to assess the relationship or the amount of covariation between the independent and dependent variable over time. Further, given the value of multiple measures of outcome, time-series analysis can be used to monitor the relation among several dependent variables over time. Since causality is assessed with respect to three factors—(1) the relationship in time of two variables, (2) the amount of covariation, and (3) the capacity to eliminate competing causal hypotheses—causal inference can be made with some confidence using these analyses. By focusing on the careful monitoring of interventions and outcomes over time, we can use analytic tools with applicability in a wide range of practice settings to learn much about the process as well as the outcome of treatment.

Further, time-series designs and analysis are compatible with the emerging "attitude" toward the use of data that is best exemplified by the work of the statistician John Tukey.⁵⁷ Tukey takes the position that in the past we have been too puritanical in our approach to data analysis. We have been reluctant to become too well acquainted with the nature of our data without the guidance of a hypothesis. He states that "a basic problem about any body of data is to make it more easily and effectively handleable by minds."⁵⁸ As a result, he has set forth a set of simple, innovative tools that emphasize graphics or pictures. He says, "The greatest value of a picture is that it forces us to notice what we never expected to see."⁵⁹ Time-series approaches lend themselves

to visual as well as statistical analysis—what Tukey calls exploratory as well as confirmatory analysis.

Thus, the third direction for empirically based methods is that of identifying validation methods that are compatible with practice.

To summarize, then, the next steps in the development of empirically grounded practice approaches must focus on means to generate, aggregate, and translate relevant knowledge into practice strategies. An important aspect of this translation process is the validation of the efficiency and effectiveness of resulting techniques for meaningful decision making.

As the earliest social work researchers understood and articulated, social work research distinguishes itself from social science research by its pragmatic focus and by the direct experience of its investigators with the social problem under investigation. Although the demands of service delivery place limits on the nature and amount of research that practitioners can do, they do not diminish the importance of their contribution. Previous discussion of research and practice in social work has been unidirectional—concerned with how practitioners can better learn from researchers. The potential contribution of practitioners provides a challenge for the field to devise knowledge-building approaches that more effectively use practitioner knowledge and experience. In part this will continue to mean enhanced communication links between researchers and practitioners. But increasingly it will mean developing procedures and technologies that allow the practitioner to take a more active role in the research process as a means to ward off the “headless machine.”

Notes

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AFDC: Mapping a Strategy for Tomorrow

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Approaches to welfare reform in recent years have tended to focus on narrow aspects of the AFDC program and single variables such as work incentives, training, or child care. This paper considers and evaluates the program from the perspective of its function as a poverty strategy. The program's history and its present condition in the context of social and political realities are discussed. Comprehensive strategies for serving the AFDC population are suggested.

Aid to Families with Dependent Children (AFDC) is the largest welfare program in the country today. It is designed to provide for impoverished children in families in which one parent is absent, disabled, or deceased.¹ Created in the original Social Security Act in 1935, the program is administered by the states and financed with both state and federal funds.

Writing about AFDC is a challenge because it is so many things to so many people. To the federal administration it is an albatross around its neck. To the states, it is frequently a political embarrassment. To conservatives, it is the refuge of people who would rather cheat than work. Even some liberals are uncomfortable with it, referring to it sometimes as "the welfare mess." But to 7.7 million children in this country it is food on the table.² To their 2.9 million mothers, it was the only place to turn.³

The problems associated with AFDC have become so numerous, and the caseload so large, that there has been a tendency in recent

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years to compartmentalize the policy issues associated with it by discussing work incentives, family size, and benefit levels rather than attempting to look at the entire program and its recipients. This tendency has been reinforced by a common theme among researchers and analysts: how to decrease the AFDC rolls, thereby reducing dependency on the public dole. Workfare, work training, child support enforcement, and the reduction of error rates, for example, are all methods of reducing the program. To many, this amounts to eliminating the "problem."

This paper begins with the assumption that the problem before us is broader than the parameters of the AFDC program. It examines the program from the perspective of its function as a poverty strategy and suggests additional and alternative poverty strategies for serving the population that is dependent on AFDC. The basic problem is poverty; the program not only does not relieve poverty, but its design is contrary to some of the fundamental values held in the larger society

History of the Program

Although AFDC has been in existence for almost fifty years, it has been changed considerably since its inception, as have the demographics of its recipients, other related social service and income maintenance programs, and our understanding of the nature of poverty and of the poor.

It is well known that Aid to Dependent Children (ADC) was only part of the Social Security Act legislation created by the Roosevelt Administration in response to the Great Depression. It is less well known that ADC was not a new concept but was essentially a federalization of Mothers' Pensions or Widow's Pensions, which had been established in most of the states between 1910 and 1926.⁴ Beginning in the Progressive Era, child advocates had pressed the states to establish these programs so that widowed mothers could stay home to care for their children. The programs were, from the beginning, paternalistic and highly selective about who received benefits.⁵ Investigators visited the households of recipients to determine whether the children were being raised in a "suitable home."⁶ If such a designation was not forthcoming, aid could be denied and the mother would have no choice but to place her children. Moreover, even though the payments were frequently less than any reasonable estimation of subsistence level, the recipients were distrusted and sometimes referred to in the press as "gilt-edged widows."⁷ The hostility toward these beneficiaries appears remarkably similar to that existing today toward women in the same

circumstances, yet it is instructive to note the differences between the two groups in order to interpret the motive for such enmity. Common interpretations for contemporary society's antagonism toward "welfare mothers" include the influence of moral judgments about unwed mothers receiving benefits for themselves and their children, and racism directed toward the disproportionate numbers of minority women who receive benefits. Yet the recipients of Mothers' Pensions were, due to discrimination in eligibility determination, primarily white.⁸ Furthermore, most of the children were not illegitimate, although it was true that a woman without a man was sexually suspect and had to be very careful to be "above suspicion" lest her character be impugned.⁹ In fact, even though society preferred that women stay home to care for their children, women recipients, like men, were blamed for their poverty, and deeply distrusted. Our society has consistently resented their need for our help.

Aid to Dependent Children was one of three welfare components of the Social Security Act: Aid to Blind and Old Age Assistance were the other two. Later, Aid to the Permanently and Totally Disabled was added. It is interesting to note that the program provided only children's benefits at the time, and was thereby designed as though a mother would not have to use a portion of the benefit for her own upkeep. A payment for the child's caretaker was not added until 1950.

Under the new federal system, the ADC program continued to be administered with ample portions of mistrust and paternalism. The private agencies, notably the Charity Organization Societies, had reluctantly relinquished the relief function in the face of their inability to come near to meeting the need during the Depression. Consequently, they worked hard to have their philosophy and way of working incorporated into the relief-giving mechanisms of the public agencies,¹⁰ and they succeeded. ADC families were viewed as deficient and in need of wise counsel as well as money. If they were not immoral they were probably lacking in initiative, and alms alone would only make matters worse by rewarding dependency. In some places, ADC was not available during harvest time, when such families were expected to work in the fields (an early example of "workfare").¹¹ The "suitable home" rules could threaten a family's eligibility, but, unlike children from middle-class families who were found to be neglected, the children in applicant families were frequently left in their homes. As a punishment for alleged negligent or inadequate child care, the family's grant could be cut off or the family placed on state general assistance, which provided a lower benefit.¹² By 1960 there were twenty-three states with "suitable home" rules.¹³ Both the "suitable home" rules and the farm work provisions were disproportionately applied to black families.¹⁴

Great diligence was applied in attempting to root out persons who might be cheating. Investigators were sent to homes to go through

the family's belongings to assess need and to make sure that the family did not have too many assets. In some states, surprise midnight raids were conducted to determine whether there was a man living in the house of the AFDC recipient.¹⁵ Not only a husband, but any male lover, friend, or acquaintance, who had a relationship with a recipient was expected to support her and her children. Of course the second function of the humiliating practice of raiding a home in the middle of the night was to serve as a deterrent to what many believed to be the immoral life-styles of these women.

In 1962, Congress passed the public welfare amendments to the Social Security Act that provided federal matching funds to help states give services to the current, former, and potential recipients of welfare. The social welfare lobby, comprised primarily of social workers, convinced the legislature that services would somehow get the welfare recipients off the rolls.¹⁶ Since counseling was the service that was most dominated in the service plans, this push for services to eliminate dependency was integrally related to the notion that people are dependent because of some psychological flaw. With treatment, the dependent could become independent. The services not only did not serve to decrease the rolls but shortly thereafter, the AFDC rolls started rising.

Between 1965 and 1976 the number of families served by AFDC increased more than threefold.¹⁷ It is likely that a variety of circumstances contributed to this phenomenon. In the 1960s the welfare program became better known than ever before. The National Welfare Rights Organization and its local branches worked to educate people about their eligibility and their right to welfare and, with the help of local advocates, held the agencies to enforcing their own regulations regarding eligibility. As a result more eligible people applied and were accepted by the program. Welfare departments were forced to become more and less blatantly punitive toward recipients.¹⁸ Midnight raids and residence requirements were discontinued.¹⁹ At the same time there was an increase in the illegitimacy rate,²⁰ with larger numbers of unmarried women applying for and obtaining aid,²¹ and the divorce rate was going up.²² Furthermore, the job-related poverty strategies of the 1960s on Poverty focused on male-headed families. The poverty strategy for single women with children was to secure their right to welfare, to get them into the labor force.

By 1967 Congress began to see that services were not doing what they wanted them to do and the caseload was getting larger. So in 1967 new service amendments were added, this time tied to employment-related activities. Also during the 1960s Medicaid and food stamps were legislated, making life considerably better for welfare recipients. Now they could receive needed health care and a supplement, targeted to food costs, to their cash benefits. The juxtaposition of the funding for work-related services and the new legislation for Medicaid

food stamps is instructive. While Congress was distressed about the increasing caseload, it also responded to the demonstrated need of the recipients.

By the late 1960s, the efforts to get welfare agencies, recipients, and the general public to see welfare as a legal right of those eligible to receive it also influenced attitudes toward social services. While no one denied the need for social services among poverty groups, it seemed manipulative and demeaning to assume that every welfare client needed casework services, or any services for that matter.²³ As a result of this new perspective, in the early 1970s income maintenance was separated from the provision of social services, jettisoning the long-lived notion that relief without counsel doomed clients to dependency and degradation. The notion of welfare as a right was strengthened.

Also, in 1969, work incentives were built into the AFDC program. Previous to this time, a recipient's grant was reduced, dollar for dollar, by any amount earned. The new legislation provided for deductibles for child care and work expenses, and earnings disregards of 100 percent on the first thirty dollars and 33 percent of additional earnings.

Meanwhile, advocates pushed for the federalization of welfare. Although many abuses that had existed prior to 1935 and under AFDC had been alleviated, there continued to be widespread inadequacy in the system and tremendous variations in policy and benefit amounts from state to state. The solution proposed was a guaranteed minimum income with uniform national standards to protect all citizens from poverty. Nixon's Family Assistance Plan (FAP) was such a measure. The states, eager to be relieved of an expensive burden, supported such a measure. Conservatives, maintaining the position that welfare should remain a local matter, opposed it. Many liberals also opposed it on the grounds that the minimum was too low. After a period of struggle and compromise, only part of the FAP, the adult provisions, was enacted, leaving AFDC as it was. Thus, in 1973, the Supplemental Security Income (SSI) program passed the Congress, and went into effect in 1974. SSI combined the previous Aid to the Blind, Aid to the Disabled, and Old Age Assistance programs into one federal means-tested program and put it into the Social Security Administration. The anticipation of maximum uniformity and simplicity of implementation and provision was perhaps overly optimistic. There was, and continues to be, state supplementation of the benefits in forty-eight states with variations in requirements for eligibility for these supplements.²⁴ Yet, as a federal program administered by the Social Security Administration, SSI not only pays more adequate benefits than AFDC, but it has, to a considerable extent, become much less visible, a great advantage to a means-tested program. A quiet yet radical change was brought about in 1975, when yearly automatic cost-of-living increases in both SSI and Social Security retirement benefits were legislated. In contrast,

because states have not kept up with inflation or have in some cases cut benefits, the median AFDC benefit (in constant dollars) actually declined by 27 percent between 1970 and 1981.²⁵

The passing of SSI was expected to be the first step, the "foot in the door," as it were, to the federalization of all welfare programs. Indeed, Carter's welfare reform program was an attempt to do this. Proposals for a negative income tax and family allowances have been made from time to time, but not taken very seriously. In the current political climate, none of these are realistic options. Indeed, the current administration wants to retreat fifty years by returning AFDC to the states! Because there has been no sweeping welfare reform, AFDC continues to be both visible and vulnerable.

Recent Changes in the Program

The Omnibus Budget Reconciliation Act (OBRA) of 1981 made some detrimental changes in the AFDC program. A survey conducted by the American Public Welfare Association reported that states expected 725,000 families to be affected by these cuts, and predicted that only half of the administration's expected savings would be realized.²⁶ Various groups are studying the impact of the deep social welfare cuts contained in OBRA.²⁷

One of the most devastating changes in AFDC was a reversal of the work-incentive provisions. Limits of \$75 per month for work expenses and \$160 per month for child care have been imposed. Also, the \$30 plus one-third disregard of earnings is only in effect for the first four months of employment. Other changes include limiting a family's allowable resources to \$1,000 and assuming that a stepparent contributes to a child's support, whether or not he has any legal liability to do so. Eligibility is restricted to families with incomes below 150 percent of the state standard of need and denied to a pregnant woman with no children until the third trimester of pregnancy.

Some provisions are optional to the states: considering the value of food stamps and housing subsidies in calculating AFDC eligibility and benefits requiring "workfare" of beneficiaries. In 1982 the states were permitted to adjust benefits when the AFDC family shares a household with other individuals by prorating the cost of shelter and utilities. However, Congress actually rejected most of the administration's proposals for social welfare cuts. For example, they refused to pass mandatory workfare and instead authorized two more years of the WIN demonstration program that the Reagan Administration sought to repeal.

past two years of changes in AFDC indicate a return to more conservative approaches. The changes focus on disincentives to work, incentives to develop self-help measures such as combining households with other relatives, and a concentration on technical details to conserve money, regardless of the impact upon the family. AFDC families' average earnings were, on the average, at 101 percent of the poverty standard in 1981. The OBRA reduced that average to 81 percent in 1982.²⁸ The provisions enacted in 1982 will lower that even further. Many AFDC recipients were also affected by cuts in food stamps and Medicaid and by increases in rents in public housing.

Current Status

Let us consider at this point what we know about the AFDC population, the program, and the program's short-range prospects.

First, AFDC still keeps recipients poor. In 1981 only in Alaska did the combination of AFDC and food stamps bring an AFDC family's total income up to the poverty level.²⁹ Now these families are poorer, and even those who are working have been pushed below the poverty mark.

Second, in the immediate future AFDC is likely to remain generally unchanged. The impetus for major welfare reform in the direction of decentralization has subsided. The "turn-back" of AFDC to the states is unlikely to happen either, because of state opposition. There may, however, be some changes made in the program that will have considerable impact, such as those that were made in 1981, but Congress is reluctant to make further cuts. Basic structural reform or major changes in administration or financing are not likely.

Third, AFDC is likely to continue to be a large program. Currently about one out of eight children in the country is depending on AFDC for support, and the Children's Defense Fund estimates that one out of four children will depend on AFDC at some time in their lives.³⁰ More than one in four of all divorced and separated women are on welfare, receiving AFDC.³¹ According to a July 1982 Census Bureau report, about one-half of all families below the poverty level in 1981 were headed by women.³² The increase in poor families headed by women is beginning to be called the "feminization of poverty."³³

Finally, we can assume that an antiwelfare bias will persist in society. The tendency to blame the victims and punish the poor for their plight has been with us since the English Poor Laws of 1601, having crossed the Atlantic relatively intact. We have come a long way in establishing the principle of legal entitlement. However, it is still not generally

acceptable in society to be on what is considered the dole. Anyone who thinks that there is no stigma attached to being an AFDC recipient (and there has been much talk of this lately) has never met such a person and certainly has never been through the process of application. It is also no longer true that people imagine all welfare recipients to be able-bodied men; many people are now aware that women and children are the majority on assistance. We must face the fact that women and children, once the worthy (albeit suspect) poor, are no longer considered worthy. And now the antiwelfare bias is imbued with sexism, promoted by the misogynist backlash to the women's movement, and racism, as people perceive large numbers of minority women receiving assistance.

Strategies for the Future

It is the challenge of advocates, in the face of high unemployment and cutbacks in both grants and services, not only to move forward, but to do so with determination and optimism. A poverty strategy, to overcome the odds against it, must be relevant to the problems at hand, creative, and multifaceted. In order to move ahead it must take into account the realities of today's society.

First, a distinction must be made between poverty and pauperism. Pauperism is dependence on relief. One hundred years ago no one was interested in poverty, just pauperism. Today many politicians share this view. It is of little consequence to them that some people are poor; of great concern is the proportion of poor persons who depend on public assistance for their subsistence. The "remedy" of increasing the stigma associated with relief, thereby discouraging potential applicants, is a solution better suited to the pauper than to the poor. Social welfare advocates know that a decline in the rolls can mean many things besides clients' advancement into prosperity. On the other hand, it must be recognized that AFDC is a safety net program, not a permanent status. Society will never accept the idea of families being on welfare for extended periods of time, and neither should social welfare professionals. To do so is to promote the existence of a permanent underclass among us, but not of us.

Clearing up the "welfare mess" and trying to do something about poverty calls for a multifaceted approach. Clearly, we have to do several things at once: (1) hold the line to prevent further erosions in AFDC and related programs, (2) improve AFDC to the extent possible, (3) create ways for families to leave the program, and (4) prevent the conditions that necessitate so many going on the AFDC rolls.

Holding the line means informing Congress that further cuts in the program will not be tolerated. It also means opposing, on the state level, the optional provisions that were legislated in 1981 and 1982. Advocates must oppose prorating the AFDC grant for shelter and utilities when the family shares the household with others. They must oppose considering food stamps and housing subsidies as income in calculating benefits, and low-paying, unskilled jobs under workfare programs.

The most obvious way to improve the program is to increase the AFDC grant. Consider that in Illinois, which provides the median maximum benefit amount among the states, gives a benefit of \$368 per month to a family of four with no other income.³⁴ In contrast, a married couple on SSI receives about the same amount per month.³⁵ Surely we can do as much for our poor children as we can for our poor elderly.

Services to AFDC families are also needed, especially day care, help in finding decent housing, child-related services, and mental health services. Rein indicates that expenditures for services for AFDC recipients under Title XX decreased from 40 percent of the funds in 1976 to 25 percent in 1980.³⁶ Likewise, the Children's Defense Fund recently published a national report that indicates that the children of this country do not get the mental health services that they need.³⁷ Thus, we need not only to monitor the service system to see what services are lacking and lobby for increased funding, but also to see that AFDC families have access to the same services as others, such as those of mental health. This requires both advocacy and brokerage among existing service systems.

If the stigma is not going to disappear, how, then, can one hope to get the support to improve the program? I believe it can be done through the demonstration of need. In spite of the stigma, the history of AFDC has also been a history of the American response to need. Advocates have succeeded in getting, for example, Medicaid, food stamps, and fuel assistance. We must demonstrate how much more is necessary for people to live decently.

In Maryland an information booklet, *Guide to Welfare in Maryland*, is published yearly by Welfare Advocates of Maryland.³⁸ Need is demonstrated by the delineation of the \$355 per month budget for a family of four. Such a family has \$14 for toiletries, toothpaste, and soap; no money for haircuts; \$36 per month for clothing; and \$9 per month for transportation, covering one round-trip bus ride per person per week.³⁹ It is the dissemination of such specific information that moves the public and the legislatures to make needed changes. Indeed, Welfare Advocates of Maryland was successful in 1979 in getting an increase in the AFDC grant and an increase in the state's needs standard this past year, thereby countervailing the new retirement rendering in-

eligible those recipients whose incomes reach 150 percent of the standard of need.

In the long run, of course, the only way to remove stigma and provide adequately for the poor will be to universalize assistance programs to the maximum extent possible. Rein and Rainwater commented:

The principal goal of welfare reform . . . should be that of reducing occasions when people going through common crises—family and unemployment—require means-tested programs. A program of universal benefits for the working and nonworking poor (for example, child allowances and credits), supplemented perhaps by development of a new form of social insurance to cope with the economic risks for single-parent household heads, should go a long way toward reducing the number of people who make use of means-tested programs at all and those who stay on welfare for even a moderate period of time.⁴⁰

The Social Security program is a case in point. The general public has come to recognize it as a transfer program, notwithstanding the fact that benefits are tied to one's prior participation in the labor force. Yet there could hardly be a less stigmatized, more fully accepted program. The risk of loss of income at the time of divorce has become a common one shared by large numbers of people, a more common than extraordinary occurrence. Perhaps it is time to equate such risks, as Rein and Rainwater suggest, with the traditionally insured risks covered by our Social Security system. Welfare advocates could begin by constructing and advocating for state systems of children's allowances. As indicated above, AFDC grew out of similar state initiatives.

The third avenue that must be pursued in the effort to alleviate problems at hand is the creation of ways of getting families "off the rolls." Four strategies come to mind: marriage, more vigorous collection of child support from fathers, improving conditions in the labor market and work training and/or the creation of jobs. Up to the present, marriage has been the first choice of conservative and liberal reformers alike. With 81 percent of AFDC families headed by a woman, the program's top priority is unemployed fathers.⁴¹ President Reagan commented that unemployment would not be so high if so many women were not in the labor force. It is not a coincidence that during the sixties many more male-headed families than female-headed families were brought out of poverty. The unspoken assumption is that if we help train and employ men, they will marry and support the women and children. Poverty strategies have consistently been geared toward employing men and getting women on the welfare rolls or in other assistance programs. This is not working.

To consider why we have so much divorce and separation and the number of single-parent families and two-paycheck families

owing would take another paper. The point is that unless we begin to see the world as it is now and is likely to be in the foreseeable future, we are not going to be able to relieve poverty among women and children.

Job training, placement programs, and related services must be geared to women's needs. This has not been the case to date. Reinhardt points out that "employment, education, and training services in fiscal year 1978 accounted for only 9 percent of all service expenditures, with only 2 percent going to AFDC recipients. Day care for children that was 'AFDC training and job related' represented only one-third of all day care costs, while day care for 'income eligibles' took up over 33 percent of the costs."⁴² Mothers cannot be expected to go to school or work with their children uncared for, either during the day or after school. And other services, particularly vocational training, must be more readily available to AFDC recipients. However, job training is not sufficient.

An AFDC recipient, when she has a choice at all, often has to decide between working and being poor or accepting assistance and being poor. In the United States today, a woman with a college degree can expect to earn what a man with an eighth grade education can earn.⁴³ The 40 percent differential between men's and women's wages has remained alarmingly constant over the past twenty years. Therefore, work training must be for jobs that pay adequately. Poverty strategists must also demand that women receive equal pay for equal work as well as better pay for women's work in the labor force. The report of the National Advisory Council on Economic Opportunity points out that "if wives and female heads of households were paid the wages that similarly qualified men earn, about half of the families now living in poverty would not be poor."⁴⁴

Exclusive concentration on decreasing the AFDC rolls while ignoring the workings of the labor market is inadvisable from a practical as well as an altruistic standpoint. A recent study conducted by the General Accounting Office found, not surprisingly, that "the low wages often earned by WIN participants were a major factor in their inability to become self-sufficient."⁴⁵ Moreover, studies have increasingly indicated the primacy of economic rather than cultural motives in the decision of AFDC mothers to enter the labor force.⁴⁶

A most complicating factor is, of course, the question of society's values concerning working women. The recent defeat of the Equal Rights Amendment suggests that in spite of the numbers of employed women, there is much ambiguity in national values regarding women's roles. The reforms I suggest involve nothing short of working toward the resolution of society's ambivalence regarding mothers in the work force, and, indeed, the place of women in society. Currently many citizens simultaneously hold negative views of middle-class mothers

who work and poor mothers who do not work. Failure to cure this cultural myopia will prevent the optimal resolution of the problem of poverty among women and children, since work requirements will constitute relegating one "class" of women to social expectations that are contrary to the cultural norms of the larger society.

Child support enforcement is also an important component to the welfare of our children. It is said that when a couple gets divorced, the husband becomes single and the wife becomes a single parent.⁴⁷ In 1975 a national survey found that just 25 percent of those eligible for child support actually received it, and that 60 percent of those who did received less than \$1,500.⁴⁸ In Maryland, where only 20 percent of those ordered by the court to pay child support actually do so, there was over \$121 million in arrears in May 1982. In Maryland the Department of Human Resources has developed new management systems for collections, and the General Assembly passed a law allowing the state to intercept tax refunds to those who are far in arrears.⁴⁹ Such processes should be implemented widely and monitored closely. Increased public awareness of the problem might also be helpful, since many people confuse alimony with child support. Television spots and other publicity might generate community pressure on fathers to fulfill their obligations to their children.

Finally, the charge to prevent the necessity of going on the AFDC rolls cannot be ignored. Increased opportunities in the job market and adequate pay for women would be sufficient prevention for many families. However, another population, young teenagers who have babies, would still be a cause for concern. Nearly half of government AFDC expenditures goes to families of women who were teenagers when their first child was born.⁵⁰ One out of ten adolescent girls in the United States becomes pregnant each year; more than 600,000 births are the result.⁵¹ Two-thirds of these pregnancies are conceived out of wedlock.⁵²

These young girls are determining a good portion of their futures from a very early age. They and their babies are high health risks and are almost programmed to be poor. Social analysts ponder their behavior. It may be helpful to ask what other future there is for these young women. If a girl knows or believes at fifteen or sixteen that the life ahead of her is continued poverty and having babies, surely she has little incentive to delay having those babies until she is twenty-one. This perception is, in too many cases, an accurate one. We must provide these girls with vocational programs and reasonable expectations of good jobs, so that they will have something additional to look forward to. The facts that more teenagers are engaging in sexual relations outside of marriage (as are more adults) and that it is fairly acceptable to have and keep the babies resulting from these relations are factors that compound the problem rather than create it. These children need

broader horizons, so that having babies will become part of the fabric of their lives rather than their whole lives.

Summary

This paper argues that only a multifaceted approach can begin to solve the problem of the large population of poor women and their children in this country. Reformers, policy analysts, and advocates must work simultaneously to improve the support of this group, help the mothers to become self-sufficient through job training, social services, and reforms in the labor market's treatment of women; and slow the growth of the program by establishing policies to help prevent teenage pregnancy. Previous poverty strategies have failed this population because they have focused on men or have been too narrow in scope. Only specifically focused efforts simultaneously applied in several areas can begin to alleviate the problems of our growing population of women and children in poverty.

Notes

1 In twenty-eight states, two-parent families may also collect AFDC under certain circumstances. These families comprise only 4.1 percent of the national caseload (see U.S. Congress, House, Committee on Ways and Means, *Background Material and Data on Major Programs within the Jurisdiction of the Committee on Ways and Means*, 97th Cong., 2d sess., Committee Print WMCP 97-29, 1982, p. 148). This portion of the caseload will not be discussed in this article.

2 U.S. Department of Health and Human Services, Social Security Administration, *Social Security Bulletin* 41 (October 1982), 148.

3 Ibid. The table does not disaggregate data on parents. I have assumed that 81 percent of the adult recipients are mothers.

4 Blanche D. Coll, *Perspectives in Public Welfare: A History* (Washington, D.C.: Government Printing Office, 1969), p. 78.

5 Ibid., p. 79.

6 Winifred Bell, *Aid to Dependent Children* (New York: Columbia University Press, 1965), pp. 5, 8. This work traces the origins, development, and functions of "suitable home" regulations in the Mothers' Pension and ADC programs. All of her sources are from state and federal reports.

7 Coll, p. 79.

8 Bell, pp. 9, 10.

9 Ibid., p. 9.

10 James Leiby, *A History of Social Welfare and Social Work in the United States 1815-1972* (New York: Columbia University Press, 1978), p. 152.

11 Bell, p. 82.

12 Ibid., pp. 32, 42.

13 Ibid., p. 58.

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- 14 Ibid, pp 32, 34, 57, 58
- 15 June Axinn and Herman Levin, *Social Welfare: A History of the American Response to Need* (New York: Harper & Row, 1982), p 246.
- 16 Ibid, pp 250-52
- 17 U S Department of Health and Human Services, Social Security Administration, *Social Security Bulletin* 45 (October 1982): 54.
- 18 Frances Fox Piven and Richard A. Cloward, *Poor People's Movements: Why They Succeed How They Fail* (New York: Pantheon Books, 1977), pp 266-75, 294, 297-305
- 19 Axinn and Levin, p 246
- 20 In 1965 the ratio of births to unmarried women per 1,000 total live births was 77.4. In 1976 it was 147.8 (see U S Department of Health and Human Services, National Center for Health Statistics, *Vital Statistics of the United States 1978* [Washington, D C: Government Printing Office, 1978], 11-53).
- 21 According to Bell, about 13 percent of the children on AFDC in 1958 were illegitimate. By 1977 the percentage had gone up to 33.8 (see Bell, p 226, U S Bureau of the Census, *Statistical Abstracts of the United States: 1982-83*, 103d ed [Washington, D C: Government Printing Office, 1982], p 343). I am assuming that many, if not most, of the mothers gave birth out of wedlock before going on the rolls rather than after.
- 22 The divorce rate per 1,000 total population rose from 2.5 in 1965 to 5.0 in 1976 (see U S Department of Health and Human Services, National Center for Health Statistics, *Vital Statistics of the United States 1978* [Washington, D C: Government Printing Office, 1978], 32-5).
- 23 Tom MacDonald and Irving Piliavin, *The Effects of Separation of Services and Income Maintenance on AFDC Recipients* (Madison, Institute for Research on Poverty, University of Wisconsin-Madison, 1978), pp. 2-3
- 24 U S Department of Health and Human Services, Social Security Administration, *Social Security Bulletin* 46 (February 1983): 78, 80
- 25 U S Congress, House, Committee on Ways and Means, *Background Material* (in 1 above), p. 128
- 26 American Public Welfare Association, *Survey of States Shows Less than Half Administration Estimates* (Washington, D C: American Public Welfare Administration, 1982), p 1
- 27 Center for the Study of Social Policy, *The Impact of Federal Budget Cuts on AFDC Recipients: A Compendium of Studies* (Washington, D C: Center for the Study of Social Policy, 1983)
- 28 Tom Joe, *Profiles of Families in Poverty: Effects of the FY 1983 Budget Proposals on the Poor* (Washington, D C: Center for the Study of Social Policy, 1982), p 3
- 29 Ibid, p 4
- 30 Children's Defense Fund, *A Children's Defense Budget: An Analysis of the President's Budget and Children* (Washington, D C: Children's Defense Fund, 1982), p 56
- 31 Testimony of Dr. Nancy S. Barrett, professor of economics at American University, before the Joint Economic Committee of Congress, February 3, 1982
- 32 U S Bureau of the Census, *Money Income and Poverty Status of Families and Persons in the U S: 1981 (Advance Data from the March 1982 Current Population Survey)* (Washington, D C: Government Printing Office, 1982), p 4
- 33 Report of the National Advisory Council on Economic Opportunity, 1981. Introduction. See also Diana Pearce, "The Feminization of Poverty: Women, Work and Welfare," *Urban and Social Change Review* 11 (February 1978): 28-36
- 34 Welfare Advocates, *Guide to Welfare in Maryland* (Baltimore: Welfare Advocates 1982), p 14
- 35 U S Department of Health and Human Services, Social Security Administration, *Social Security Bulletin* 45 (October 1982): 49
- 36 Mildred Rem, "Work in Welfare: Past Failures and Future Strategies," *Social Service Review* 56 (June 1982): 210-29, at 214.
- 37 Children's Defense Fund, *Unclaimed Children: The Failure of Public Responsibility to Children and Adolescents in Need of Mental Health Services* (Washington, D C: Children's Defense Fund, 1982)
- 38 Welfare Advocates, *Guide to Welfare in Maryland*
- 39 Ibid, p 13.

40. Martin Rein and Lee Rainwater, "Patterns of Welfare Use," *Social Service Review* 52 (December 1978): 512-34, at 532-33
41. U S General Accounting Office, Comptroller General of the United States, *An Overview of the WIN Program: Its Objectives, Accomplishments, and Problems* (Washington, D C: General Accounting Office, 1982), p. 13
42. Rein, p. 214
43. U S Bureau of the Census, *Money Income and Poverty Status*, p. 14
44. Diana Pearce and Harriette McAdoo, *Women and Children Alone and in Poverty* (Washington, D C: Women's Research and Education Institute, 1981), p. 3, quoting Patricia C. Sexton, *Women and Work*, R & D Monograph No. 46 (Washington, D C: Department of Labor, Employment, and Training Administration, 1977)
45. U S General Accounting Office, *An Overview of the WIN Program*, p. 21
46. See Rein and Rainwater, Philip A. AuClaire, "The Mix of Work and Welfare among Long-Term AFDC Recipients," *Social Service Review* 53 (December 1979): 586-605, also Marlene Sonju Chrissinger, "Factors Affecting Employment of Welfare Mothers," *Social Work* 25 (January 1980): 52-56
47. Pearce and McAdoo, p. 4
48. Ibid.
49. Welfare Advocates, *Guide to Welfare in Maryland*, p. 7
50. U S Department of Health and Human Services, Office of Human Development Services, *The Status of Children, Youth and Families, 1979* (Washington, D C: DHHS, 1980), pp. 47-48
51. Frank G. Bolton, Jr., *The Pregnant Adolescent* (Beverly Hills, Calif.: Sage Publications, 1980), pp. 9-10
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The Welfare Explosion: Mass Society versus Social Control

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Kirsten A. Grønbjerg's "mass society" thesis is the most significant alternative to Piven and Cloward's "social control" explanation of the welfare explosion. Grønbjerg's analysis, however, suffers from problems of conceptualization, measurement, and evidence. In this article these two competing perspectives are reviewed and empirical measures developed to assess the validity of one over the other. Contrary to Grønbjerg's results, this analysis offers support for the "social control" as opposed to the "mass society" thesis.

As David A. Rochefort has suggested, two schools of thought dominate contemporary analyses of the role of social welfare in Western societies: the progressive or liberal perspective and the neo-Marxist or social control perspective.¹ Both perspectives have been employed in recent years to explain the dramatic growth in the number of families receiving Aid to Families with Dependent Children (AFDC) in the late 1960s and early 1970s. Recently, Kirsten A. Grønbjerg has employed a variation of the liberal perspective and provided an empirical test of her account of the welfare explosion.² In several respects, Grønbjerg's analysis parallels but contradicts the major neo-Marxist explanation of the welfare explosion as articulated by Frances Fox Piven and Richard A. Cloward.³ In the following analysis, we highlight the parallel but contradictory nature of these two competing perspectives and provide an empirical test to suggest the validity of one perspective over the other.

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The Welfare Explosion Puzzle

Between 1950 and 1960, the number of families receiving AFDC grew 17 percent; however, in the next decade, the AFDC rolls grew 158 percent and by 1975 had begun to stabilize at a level that represented a 353 percent increase over 1960.⁴ Most of this growth was concentrated in the late 1960s and early 1970s, and between 1965 and 1975 the rolls grew by 220 percent.⁵ What were the primary factors behind this acute, unprecedented extension of welfare to the poor?

Several analysts have pointed to the migration of over 3 million blacks, many of them poor, between 1945 and 1965, from southern states with stringent welfare policies to northern states with more liberal welfare practices.⁶ Others have emphasized the increases in the formation of female-headed poor black families that were intensified by the migration north and grew sharply by the 1960s.⁷ Still others have stressed the increased need of the poor in the face of their increasing structural unemployment in the 1960s.⁸ We have also been reminded that the Civil Rights Movement, the nation's "rediscovery" of poverty in the early 1960s, and the Johnson Administration's War on Poverty encouraged many poor to forego their reluctance to take welfare and apply for assistance.⁹ Analysts have also stressed the increased professionalism of social welfare bureaucracies¹⁰ or have pointed to the lax administration of welfare programs by those bureaucracies¹¹ as the primary causes of the welfare explosion.

The issue of the welfare explosion continues to be a source of fundamental controversy among those who seek to explain the intent and purpose of public welfare, and the progressive and neo-Marxist perspectives have been applied to the welfare explosion.¹² Neo-Marxist analysts of the social welfare state, such as Piven and Cloward, have argued that welfare operates to perform social control functions in mature capitalistic political economies; and during times of social unrest and political instability, the state is driven inexorably to ease the access of the poor to welfare so as to co-opt them and perpetuate the legitimacy of the political economy in spite of its failure to create economic opportunities for the poor.¹³ Liberals have suggested that the social welfare state represents a basically humanitarian response by the state to social problems endemic to industrialized societies.¹⁴ This perspective, however, has been in need of revision in order to account for the rapid growth of the welfare rolls in the 1960s and early 1970s.¹⁵ In 1977, Kirsten A. Grønberg put forward such a revision that now stands as the most explicit and comprehensive alternative to Piven and Cloward's neo-Marxist account of the welfare explosion.¹⁶

For Grønberg, in the 1960s, the welfare explosion was the result of the acceleration of the United States toward a "mass society," where

all persons are seen by the state as having legitimate entitlements as citizens.¹⁷ The movement toward a "mass society" constitutes an expansion in the concept of citizenship beyond basic political rights to include social and economic rights.¹⁸ In a "mass society," poor people as citizens are vested with the right to receive government assistance when their basic social and economic rights cannot legitimately be fulfilled through private means. This expansion of citizenship, in Grønbjerg's terminology, constitutes part of the process by which the "center" incorporates the "periphery."

Grønbjerg revises the liberal perspective in an important way to account for the welfare explosion. She emphasizes that the state accords assistance to the poor because they are entitled to it as citizens and suggests that this is different from allowing the poor access to welfare on the basis of need. In other words, receipt of public assistance is a right all citizens can invoke when they have a legitimate basis for doing so rather than a privilege the state accords them when it so wishes.¹⁹ This constitutes a revision of the liberal idea that welfare responds to need and enables Grønbjerg to account for the dramatic growth in the AFDC rolls that far surpassed any increases in need in the 1960s and 1970s.

Parallelism: Mass Society versus Social Control

In spite of her revisionism, Grønbjerg's analysis still represents a liberal account of the welfare explosion that rejects Piven and Cloward's conception of the role and function of welfare in our political economy. We actually have two parallel perspectives that view the welfare explosion in three contradictory ways.²⁰ First, Grønbjerg sees a relatively rapid shift in society's commitment to public assistance, but she emphasizes, as liberals before her, that it constitutes part of a secular trend toward what she refers to as a "mass society."²¹ Alternatively, Piven and Cloward see the growth of welfare as, historically, part of a cyclical process in capitalist societies wherein welfare is expanded during times of political instability and contracted during times of relative social peace.²² Second, although Grønbjerg stresses the expansion of the concept of citizenship rather than growth in needs as the force behind the welfare explosion, she reinforces the liberal notion that the welfare explosion is reflective of a positive, humanitarian trend in society and that the expansion of citizenship as such is a good.²³ Conversely, Piven and Cloward suggest that the welfare explosion reflects less the humanitarianism of the social welfare state than its "latent" functions to assist the state in performing social control.²⁴ Third, Grønbjerg's analysis implies that

the growth of welfare rolls is a manifestation of the integration of the poor (periphery) into the mainstream of society (center) by virtue of the expansion of citizenship.²⁵ Piven and Cloward's analysis, however, implies that the welfare explosion reflects the limited extent to which the state is willing to go to incorporate the poor and serves to perpetuate the poor as a relatively permanent "underclass" who suffer from isolation from the mainstream of our society.²⁶

The parallelism of these two competing perspectives is also reflected in the contradictory ways they interpret the same developments as important factors in the welfare explosion. Grønbjerg suggests that the increased willingness of the poor to apply for and take social assistance reflected the change in societal norms about welfare that constituted a shift from welfare as a privilege the state accorded the needy to welfare as an entitlement.²⁷ Piven and Cloward, however, argue that the poor became less willing to "regulate themselves" or internalize society's dominant norms of self-sufficiency that had previously discouraged them from seeking welfare for fear of being stigmatized as "dependent."²⁸ For Grønbjerg, the new climate conducive to the poor's taking welfare was reflective of society's growing commitment to welfare as entitlement. For Piven and Cloward, the new climate represented a breakdown in the social order and an increase in political instability. For Grønbjerg, liberalization of the poor's access to welfare was something the top or center of society extended to the bottom or periphery as reflective of a changing society. For Piven and Cloward, the poor's increased access to welfare represented something the bottom or periphery forced the top or center to accord them in order to maintain the status quo.

The parallelism between these two perspectives intensifies when we consider that both offer conflicting interpretations of how the "economic rights" of citizenship have emerged. In recent writings, Piven and Cloward have argued that while the initiation and liberalization of welfare programs since the Great Depression were originally co-optative, they simultaneously created the conditions for ending the cyclical nature of public welfare and starting a more democratic political economy based on the idea that "democratic rights include economic rights."²⁹ They, however, still see the welfare explosion of the late 1960s and the early 1970s as a manifestation of the social control function of public welfare and the tendency of public welfare to expand only in the face of political instability and civil disorder.³⁰ For Piven and Cloward, economic rights have been achieved through conflict and struggle. For Grønbjerg, economic rights have been achieved through peaceful social and economic development.

Stephen M. Aigner has suggested that the parallelism between these two competing perspectives lies in their imputing different motives to social welfare policymakers. We think not. Both perspectives are struc-

tural and functional explanations of welfare's role in society. Therefore, both deemphasize the long-run significance of motives and volitional behavior and emphasize the functional necessities to which institutions in societies conform. Although both perspectives may include within them a space for motives in affecting institutional stability and change, their purposes are not to explain changes in welfare policy in terms of the character, personality, or intentions of specific actors. In other words, the debate between these perspectives is not over the benevolence or malevolence of social welfare policymakers. It is over the functional obligations of social welfare policy in recent years.¹¹

Whither Mass Society?

Given the extensiveness of the data Grønbjerg presents to buttress her argument, her research cannot be dismissed lightly, and any critique of it must include alternative data analysis. Three major problems in Grønbjerg's empirical analysis stand out.

One is that Grønbjerg's analysis represents a form of the classic methodological problem in the social sciences of "misplaced concreteness." Her analysis is fundamentally flawed because it rests its conclusions on a firm empirical base that may not be related to those conclusions. Specifically, Grønbjerg goes to great lengths to suggest that since the more urbanized, industrialized, and professionalized states had relatively higher welfare roll growth in the 1960s than other states, that welfare growth must be due to the development of a "mass society." Grønbjerg makes the case that urbanization, industrialization, and professionalization are all indicators of the development of a "mass society" that is committed to a broad conception of citizenship and, as a result, more liberal social welfare policies. These factors, however, could also be nothing more than indicators of economic development and all the social and economic problems endemic to such development. That is, more economically developed states tend to have more of the social and economic problems that are addressed through the expansion of social welfare programs.

Through stepwise multiple regression, Grønbjerg finds that in 1960 indicators of need for social assistance in state populations better explained the relative levels of the AFDC rolls across the states than did indicators of the relative levels of modernization or development of "mass society" in the states.¹² Grønbjerg's multivariate analysis for 1970, however, indicated that measures reflective of the development of "mass society" in the states had joined measures of need as the best predictors of relative levels of AFDC rolls across the states.¹³ In addition,

she found that mass society indicators were important contributors to explaining variation across the states in the relative levels of growth in their AFDC rolls from 1960 to 1970.³⁴ Grønbjerg also buttressed her analysis by reporting that during the 1960s almost all states made their eligibility standards more lenient, and states with relatively strong "mass society" characteristics were more apt to have higher application and approval rates for AFDC, indicating their relatively stronger commitment to affording welfare to those who needed it.³⁵

The problem of "misplaced concreteness" begins with Grønbjerg's operationalization of "mass society." Using factor analysis, Grønbjerg arrives at a set of indicators that are distinct from measures of need and which, she suggests, are reflections of modernization or movement by a state toward "mass society." These measures include: voter participation, median education, percentage of the work force deemed professional, urbanization, industrialization, and per capita revenue collected by the state.³⁶ Grønbjerg emphasizes that these indicators are related and, according to factor analysis, constitute elements of a factor or dimension of her state data. Yet, there is an insufficient basis in her discussion for assuming that these are indicators of states tending toward a "mass society" that is given to expanding its concept of citizenship to include welfare as an entitlement. At best, these are indicators of modernized, economically developed states. To imply more than this is to transform data analysis into speculation. To suggest that economically developed states became in the 1960s more committed to welfare as an entitlement relative to other states is to make a leap of faith that Grønbjerg's data cannot sustain. Instead, it is distinctly plausible to infer from these data nothing other than that more economically developed states tended to have relatively higher increases in their AFDC rolls in the 1960s.

The problem of "misplaced concreteness" continues in that Grønbjerg's evidence for the "mass society" thesis is thinner than we are led to believe. It is based largely on the results of multiple regression analysis of the AFDC rolls in 1970. In this analysis, we find that the percentage of broken families (an indicator of need, not "mass society") is far and away the most important determinant in explaining variation in the level of the AFDC rolls across states. Grønbjerg rests her case at this juncture on the fact that in 1970 as opposed to 1960 two "mass society" indicators (per capita revenue and percent high school educated) contributed somewhat to explaining the variation of AFDC rolls across the states.³⁷ How this implies evidence for the "mass society" thesis remains the subject of speculation. The fact remains that a basic indicator of need for social assistance remains the overwhelmingly most important determinant of variation in state AFDC rolls in 1970. Grønbjerg goes on to find that "mass society" indicators were better predictors of AFDC roll growth from 1960 to 1970 than measures of need. Unfortunately,

Grønbjerg only provides simple correlations here and eschews multiple regression, thereby preventing us from estimating the effects of each factor on AFDC roll growth controlling for other factors. In the end, this very exhaustive, concrete presentation of data allows us to imply no more than that economically developed states had more rapid AFDC roll growth in the 1960s compared to other states. While this may be a manifestation of "mass society," it may also be a manifestation of many other things.³⁸

A second problem in Grønbjerg's analysis is a substantive one. She implies that the growth of the welfare rolls as a manifestation of the expansion of citizenship is a progressive development in our society. As such, it should not be interpreted as a manifestation of the state's role in mature capitalistic societies of acting to control the poor and thereby perpetuating the legitimacy of a class-based society. Yet, by simply calling welfare an entitlement that comes with an expanded form of citizenship, Grønbjerg did not show that welfare growth was unrelated to social control functions in economically developed communities. In fact, the welfare entitlement of expanded citizenship may be nothing more than an artifice of the state's social control mechanisms. Grønbjerg may only be developing euphemisms for the functional responsibilities of the state in an advanced capitalistic society. In this sense, her problem is one of mischaracterizing the subject under study. Her labels imply that welfare growth as a manifestation of the expansion of citizenship is a good, unrelated to the social control functions of the state. Yet, accepting her labels, one can still argue that the functional consequence of the expansion of citizenship is the enhancement of the state's ability to control people. It is important to bear in mind that labeling something does not mean we have explained it.

The third problem in Grønbjerg's analysis is her failure to test for the social control interpretation of the welfare explosion. This is a glaring oversight in light of her attempts to conclude that her analysis presents a refutation of Piven and Cloward's work. Actually, her empirical evidence could be used to buttress the social control argument as well as the mass society argument for the welfare explosion. The following analysis seeks to provide an alternative empirical test to Grønbjerg's in a way that allows us to distinguish results that support one interpretation over the other.

Data Analysis

Like Grønbjerg, we focus our empirical analysis on welfare growth within each of the fifty states rather than for the nation as a whole

By examining a series of units, we can assess variation in indicators of "mass society" and need for social control so as to determine which are associated with welfare growth. We choose states, rather than other units such as localities, because they have substantial latitude in how they administer AFDC.⁹ We employ multiple regression that enables us to assess which of a number of factors best explains variation across states in the growth of their AFDC rolls. Our analysis includes indicators that Grønbjerg suggests reflect "mass society": percent of work force deemed professional, median years of formal education, percentage of population living in central cities, interparty competition, and voter participation. Grønbjerg also includes per capita revenue as an indicator of the effort a state makes to raise revenue relative to its resources. Tax effort, we feel, is a better measure of "mass society" because it reflects the willingness of a state to tax itself for public purposes given its capacity to do so.¹⁰ Our analysis also includes an indicator of the state's need for social control. We use an index of the severity of rioting in the state from 1965 to 1968.¹¹ We include indicators of the relative level of need of the state population for social assistance: unemployment rate, black net in-migration, and the percentage increase in poor female-headed families.¹² We also include median income as a measure of the state's capacity for providing social assistance irrespective of its willingness, and average community action expenditures per poor person as an indicator of community action efforts to increase the poor's access to social assistance.¹³

Table 1 presents the results of our regression analysis and indicates that median income and the severity of rioting are the measures most strongly associated with variation in 1960–70 state AFDC roll growth while controlling for other factors. The indicators of "mass society," other than tax effort, are not strongly related to variation in state AFDC roll growth in the 1960s once we take other factors into account. Table 1 also presents the results on variation in state AFDC roll growth for 1969–70. We examined 1969–70 for three reasons: (1) this was the first year after the period of major rioting (1965–68), (2) this was the first year after the national government took a series of actions to liberalize AFDC, and (3) 1969–70 had the largest annual growth rate for any year since the program's inception.¹⁴ The results indicate that the severity of rioting is the most important factor in explaining variation in AFDC roll growth across the states for 1960–70. Once again, indicators of "mass society" in the states, other than interparty competition, do not relate to variations in state AFDC roll growth, once other factors, such as a state's need for social control, are taken into account.

We do not wish to suggest that our empirical analysis represents definitive evidence that states liberalized the poor's access to welfare strictly in response to the intensity of rioting they suffered. Nor do we wish to imply that our evidence serves as a conclusive basis for

Table 1

FACTORS AFFECTING AFDC ROLL GROWTH 1960-70 FOR THE 50 AMERICAN STATES

	INCREASES IN AFDC FAMILIES PER 1,000 POOR FAMILIES			
	1960-70		1969-70	
	r	Beta	r	Beta
Median income	74	65*	64	37*
Severity of rioting .. .	61	34*	69	53*
Unemployment	11	12	09	12
Poor female-headed families	50	- 06	40	- 13
Tax effort	12	24*	03	10
Voter participation .. .	30	14	22	- 15
Interparty competition ..	51	03	50	38*
Median education	42	- 02	37	15
Black migration	49	- 16	42	- 11
CAP expenditures	39	- 08	31	- 05
Workforce professionals (%) ..	53	10	38	- 08
Central city (%)	38	12	31	10
<i>R</i> ²	73		70	

NOTE.—Figures in the "r" column indicate the simple correlation between each independent factor and the dependent factor. Figures in the "Beta" column indicate the standardized regression coefficient between the independent variable and the dependent variable controlling for all other factors and are the result of simple multiple regression.

* *F* is significant at the .01 level.

rejecting the "mass society" thesis and accepting the social control thesis. Instead, our findings suggest that once one undertakes an empirical test that distinguishes evidence for one thesis over the other, the social control thesis finds more support in the data than the "mass society" thesis. Contrary to recent claims, the available data do not favor the "mass society" thesis.⁴⁵

David A. Rochefort has recently written,

It is a serious weakness in progressive and social control perspectives that they rely heavily on assumptions concerning the "true" nature of man or the state. Whether these assumptions are positive, as in the case of progressive theory, or negative, as in radical theory, they are intrinsically unverifiable. . . . In this sense, neither the progressive nor the social control perspective really constitutes a model developed through scientific inquiry; they are, instead, systems of values and beliefs reflecting the political philosophies of liberalism and Marxism, respectively. Ideology, not observation and inductive reasoning, largely determines how these prevailing theoretical models of social welfare policy view their subject.⁴⁶

Rochefort is correct to suggest that these two dominant perspectives on social welfare policy are essentially philosophical and value-laden. Yet Rochefort is wrong on two counts. First, given our data analysis we feel it is possible to provide empirical evidence that suggests which of these perspectives is most relevant for characterizing the welfare

explosion of the late 1960s. Second, the solution to the philosophical and value-laden nature of these perspectives is not to cast them aside in search of "scientific," value-neutral perspectives on social welfare policy. Such alternatives do not exist. Social theory is inherently tied to values and normative judgments.⁴⁷ The solution to the philosophical character of social theory is to extend our analysis to these implicit philosophical assumptions, and then, on the basis of both philosophical argument and empirical documentation, to assess the validity of one perspective over the other. Our analysis has sought to contribute to the empirical dimension of the debate between these perspectives as they relate to explaining the welfare explosion.

Conclusion

Given the confluence of factors directly related to the growth of the AFDC rolls in the 1960s, emphasis on one factor to the exclusion of the others obviously represents an incomplete and mischaracterized explanation of the dynamics behind the welfare explosion. Neither the "mass society" nor the social control perspective is really a monocausal explanation of the welfare explosion.⁴⁸ Instead, they are theoretical perspectives that establish the logic underlying the dynamics involved in the welfare growth of the 1960s. Grønbjerg's thesis is flawed not because it emphasizes one factor to the exclusion of others. Instead, the "mass society" thesis represents a misleading characterization of the dynamics behind the welfare explosion. It attempts to explain the dramatic growth in families receiving AFDC in the very salubrious, benign terms of society according the poor economic entitlements, yet it does so on the basis of data that can also be interpreted to imply that the state, in the economically developed setting of advanced capitalism, with its low-wage secondary labor markets and superfluous underclasses, has a functional imperative to extend welfare to the poor so as to regulate them. Given our examination of data that enable us to distinguish findings supporting one interpretation over another, we must conclude that much doubt remains as to the superiority of the "mass society" explanation of the welfare explosion over the social control thesis.

Notes

1 David A. Rochefort, "Progressive and Social Control Perspectives on Social Welfare," *Social Service Review* 55 (December 1981): 568-92.

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2. Kirsten A. Grønberg, *Mass Society and the Extension of Welfare, 1960–1970* (Chicago: University of Chicago Press, 1977)

3. Frances Fox Piven and Richard A. Cloward, *Regulating the Poor: The Functions of Public Welfare* (New York: Vintage Books, 1971), pp. 222–47

4. *Statistical Abstract of the United States* (Washington, D.C.: Department of Commerce, Bureau of the Census, 1961–76)

5. Between 1960 and 1965, the rolls grew 41 percent, between 1965 and 1970, 1 percent, 1970–75, 75 percent, and 1975–80, 6 percent. The largest yearly growth occurred from 1969 to 1970 when the rolls grew 36 percent. In 1960, there were 745,300 families receiving AFDC; by 1975 there were over 3.35 million families on AFDC (see n. 4 above)

6. Roger Beardwood, "The Southern Roots of the Urban Crisis," *Fortune* 78 (August 1968): 80–87, 151–52, 155–56, as discussed in Piven and Cloward, *Regulating the Poor*, pp. 183–226

7. Daniel P. Moynihan, *The Negro Family: The Case for National Action* (Washington, D.C.: Department of Labor, Office of Planning and Research, 1965). Levitan et al. have written, "In 1972 a third of all nonwhite families were female-headed—more than three times the proportion among white families and a substantial increase over the 22 percent of all nonwhite families with female heads in 1960" (see Sar A. Levitan et al., *Still Dream: The Changing Status of Blacks since 1960* [Cambridge, Mass.: Harvard University Press, 1975], p. 114). Yet, Lurie has noted that even if all of the new white and nonwhite female-headed families in the period between 1959 and 1966 had received assistance, only about 10 percent of the AFDC increase during that time period would be accounted for (see Irene Lurie, *An Economic Evaluation of Aid to Families with Dependent Children* [Washington, D.C.: Brookings Institution, 1968])

8. See Harrel R. Rodgers, Jr., *The Cost of Human Neglect: America's Welfare Failure* (Armok, N.Y.: M. E. Sharpe, Inc., 1982), pp. 77–83

9. James T. Patterson, *The Welfare State in America, 1930–1960* (Durham, England: British Association of American Studies, 1981), pp. 20–32.

10. See John D. McCarthy and Mayer N. Zald, *The Trend of Social Movements in America: Professionalization and Resource Mobilization* (Morristown, N.Y.: General Learning Press, 1973); Daniel P. Moynihan, "The Professionalization of Reform," *The Public Interest* 1 (Fall 1965): 6–16, and Patterson, p. 32

11. Martin Anderson, *Welfare: The Political Economy of Welfare Reform in the United States* (Stanford, Calif.: Hoover Institution Press, 1978), pp. 154–55

12. Rochefort, pp. 568–92.

13. Piven and Cloward, *Regulating the Poor*, pp. 8–22

14. Harold L. Wilensky, *The Welfare State and Equality* (Berkeley: University of California Press, 1975)

15. See Rochefort, p. 576

16. Morris Janowitz suggests Grønberg's work "transforms" the sociological analysis of welfare. See his foreword to the book.

17. Grønberg, p. 11.

18. *Ibid.*

19. *Ibid.*, pp. 14–16

20. On the idea of parallelism in social theory, see Michael A. Simon, *Understanding Human Action: Social Explanation and the Vision of Social Science* (Albany: State University of New York Press, 1982), pp. 196–99

21. Grønberg, p. 161

22. Piven and Cloward, *Regulating the Poor*, pp. 3–38

23. Grønberg, p. 158

24. Piven and Cloward, *Regulating the Poor*, pp. 7–8

25. Grønberg, pp. 8–20

26. Piven and Cloward, *Regulating the Poor*, p. 38

27. Grønberg, pp. 147–48

28. Piven and Cloward, *Regulating the Poor*, p. 167.

29. Frances Fox Piven and Richard A. Cloward, *The New Class War: Reagan's Attack on the Welfare State and Its Consequences* (New York: Pantheon Books, 1982), and "The American Road to Democratic Socialism," *Democracy* 3 (Spring 1983): 58–69.

30. Frances Fox Piven and Richard A. Cloward, "Humanitarianism in History: A Response to the Critics," in *Social Welfare or Social Control? Some Historical Reflections on Regulating the Poor*, ed. Walter I. Trattner (Knoxville: University of Tennessee Press, 1983), pp. 114-57.

31. Stephen M. Aigner, "Social Development and Mass Society: Iowa," *Social Service Review* 56 (September 1982): 375-92, at 379.

32. Grønberg, chap. 5.

33. Ibid., chap. 6.

34. Ibid., pp. 111-19.

35. Aigner, pp. 377-79.

36. Grønberg, pp. 104-6.

37. Ibid., p. 102.

38. See Eugene Smolensky's review of Grønberg's book in the *Journal of Economic History* 38 (June 1978): 545-46.

39. See Grønberg, pp. 20-30.

40. Our "mass society" factors are calculated to reflect the state's conditions during the 1960s, and therefore each one is an average of the state's standing on that factor for 1960 and 1970. Voter participation is the average turnout in the 1960 and 1968 presidential elections. Interparty competition is a summary measure derived from Austin Ranney, "Parties in State Politics," in *Politics in the American States*, ed. Herbert Jacob and Kenneth Vines (Boston: Little, Brown & Co., 1971).

41. The severity index is the summation of the standardized Z-scores for the number of civilians killed and injured, the number of law officers killed and injured, the number of arrests, and the number of arsons during riots between 1965 and 1968. Cronbach's α for this index is .90 and indicates sufficient commonality to use them in one index. The index correlates with the number of riots ($r = .80$) in our state data. We, however, use the index rather than the frequency of rioting because we feel it is a more meaningful measure of the extent to which each state was wracked by rioting in the 1960s. Although we recognize that rioting occurred before and after the 1965-68 period, we feel our data cover all the major riots and provide a sound base for indicating the relative levels of rioting across the states. Our data are derived from U.S. Senate, Government Operations Committee, Permanent Subcommittee on the Investigations, *Staff Study on Major Riots and Civil Disorders, 1965-68* (Washington, D.C.: Government Printing Office, 1968).

42. The unemployment rate is the average for all years in the 1960s. Black net immigration is for 1960-70. Percentage increase in all families that are poor and female-headed is for 1960-70.

43. All data other than that on the riots are from *Statistical Abstract* (n. 4 above).

44. These liberalizations included the abolition of residency requirements and man-in-the-house rules, and the initiation of income disregards, self-declaration of eligibility, and the right to a fair hearing before being denied or terminated from welfare. Also by 1969, the Work Incentive Program (WIN) was implemented by the federal government and represented the one restriction to AFDC to be implemented during this time. For an in-depth analysis of postriot AFDC increases, see Sanford F. Schram and J. Patrick Tubbett, "Civil Disorder and the Welfare Explosion: A Two-Step Process," *American Sociological Review* 48 (June 1983): 408-14.

45. See Aigner, p. 379.

46. Rochefort, pp. 587-88.

47. Simon, pp. 196-99, and Harry J. Kienzie, "Epistemology and Sociology," *British Journal of Sociology* 21 (December 1970): 413-24.

The Free Will–Determinism Debate and Social Work

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Social workers' judgments about the determinants of clients' problems have a substantial effect on practitioners' willingness to provide assistance. There is considerable variation in professionals' beliefs about the extent to which clients are themselves responsible for their difficulties, as opposed to factors that are beyond their control. This article examines the philosophical controversy known as the free will–determinism debate, and assesses its implications for the profession of social work.

In the fall of 1982, *Time* magazine featured a cover story on the dismal status of the U.S. prison system. During the week following its appearance, two letters to the editor were published in response to the article's commentary on our nation's correctional institutions and their inmates.

To the Editors

When considering prisons, it should be kept in mind that every inmate is there by choice. He made the decision to do time the moment he committed the crime.

To the Editors

Our genes and our environment control our destinies. The idea of conscious choice is ridiculous. Yes, prisons should be designed to protect society, but they should not punish the poor slobs who were headed for jail from birth.

The juxtaposition of these letters is, of course, striking. Their authors clearly view the world through radically different lenses. The first is

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committed to the view that individuals who violate our laws and statutes do so deliberately, willingly, and rationally. In short, criminals know what they are doing, and simply take calculated risks to which are attached, at least in principle, well publicized penalties. From the point of view of the second author, those convicted of breaking the law are essentially victims of misshapen genes or toxic environmental circumstances that have led them forcibly down one of life's wayward paths.

These contrasting views concerning the determinants of human misbehavior represent one of the most enduring controversies in recorded history, commonly known as the free will–determinism debate. Put briefly, on one side are those who argue that human beings are wilful actors who actively shape their own destinies and who independently make rational choices based on personal preferences and wishes. On the other side are those who claim that human behavior is largely or entirely determined by a series of antecedent events and factors, such that any given "choice" or behavior is a mere product of prior causes, be they psychological, environmental, mechanical, or physical.

Implications for Social Work

The free will–determinism debate is remarkably relevant to the practice of social work in at least two general ways. First, social workers repeatedly make assumptions about the determinants and malleability of clients' problems and shape interventions or treatment plans accordingly. Mental retardation, we may conclude, is a function of certain chromosomal abnormalities and is thus amenable to only a limited range of treatment approaches. Family discord, on the other hand, may emerge as a result, for example, of personality quirks of family members, the strain of a sudden illness, financial catastrophe, or certain learning disabilities. Poverty, we might argue, stems from individual lethargy, structural problems in our economy that lead to high rates of unemployment, or physical disabilities. How we respond to these problems—whether we focus our attention on environmental determinants, health problems, or individual character—frequently depends on assumptions that we make about the extent to which people's problems are the result of factors over which they have control.

Second, the conclusions that social workers reach about the causal determinants of clients' difficulties frequently lead to assumptions about the extent to which they deserve assistance and whatever benefits or services there are to offer. If we conclude that a client is chronically depressed because of a series of unforeseen, tragic events in her life,

we may be more inclined to offer solace and support than we would be if we decide that her depression is a calculated, willful, protracted, and self-serving attempt to gain sympathy and attention. If we conclude that a client has difficulty retaining jobs because of a congenital disability that he has tried persistently to overcome, we may be more willing to invest our professional time and energy than we would with a client who is fired from jobs repeatedly because he resents having to show up for work at 8:30 A.M. each day. Thus, our willingness to attribute responsibility for clients' problems to factors that are to some extent beyond their control can affect our willingness to assist them. The free will–determinism debate therefore has bearing not only on social workers' beliefs about the causes of clients' difficulties and their capacity to change but, as well, on their willingness to help them change.

One of the central pillars in the foundation of contemporary social work is the value of self-determination, a concept that is closely tied to assumptions about free will. Since the early 1900s, professional social workers have been guided by the assumption that a key mission of the profession is to help clients achieve what they want to achieve and to assist them in the formation and pursuit of meaningful goals. Underlying this principle, however, is a tacit assumption that clients have the capacity to chart and shape their lives—that they are not like billiard balls whose paths are fully determined by antecedent events—and, further, that they deserve social workers' assistance. It is thus clear that whatever position we take in the free will–determinism controversy, it stands to have a substantial effect on our inclination to uphold the longstanding principle of self-determination. Florence Hollis acknowledged this dilemma years ago in an address delivered at a United Nations seminar concerning the advanced study of social work. "The first question to be raised about these scientific principles is often the philosophical one of whether the assumption of lawfulness in behaviour and of cause and effect relationships in behaviour does not mean that casework has become completely deterministic. How can this be reconciled with the principle of self-determination?"²

The Nature of the Debate

The free will–determinism debate actually has ancient philosophical roots. Empedocles and Heraclitus, for example, are early sources of pre-Socratic thought on the meaning of determinism in nature and the idea of natural law. Ideas concerning determinism—especially the influence of divine will—were later given prominence in the fourth

century B.C. by the Stoics, the Greek school of philosophy founded by Zeno.

The origins of modern world debate about free will and determinism are ordinarily traced to the work of the eighteenth-century French astronomer and mathematician Pierre Simon de Laplace. Laplace's assertions about determinism in the world as we know it were heavily dependent upon the scientific theory of particle mechanics, according to which a knowledge of the mechanical state of all particles at some particular time together with a knowledge of "all the forces acting in nature" at that instant would enable one to discover all future and all past states of the world. With this information, one could, in principle, discover not only all future and past mechanical states in the world, but all others as well, such as electromagnetic, chemical, and psychological.⁴

The contemporary philosophical debate, as I noted above, boils down to a clash between those who credit human beings with the ability to make rational willful choices and to act upon those choices, independent—at least in part—of prior causes, and those who reject this view. Each ideological camp has noteworthy proponents whose views range from the moderate to the extreme. For extreme determinists, everything, including our thoughts, emotions, and behavior, is the effect of some prior cause. As the philosopher Ernest Nagel has observed, "determinism in its most general form appears to be the claim that for every set of characteristics which may occur at any time, there is some system that is deterministic in respect to those occurrences."⁵

The doctrine of determinism contains two essential ingredients: a belief in universal causal laws and the concept of predictability. In principle, any current state of affairs has identifiable determinants and knowable, predictable outcomes. According to determinism, then, problems such as mental illness, low self-esteem, poverty, crime, child abuse, and drug abuse can be traced to historical antecedents that have led progressively to the victim's current difficulties. The responsibility for the client's problems is not his or her own; rather, it resides in the onset and consequences of prior events. The implication of the determinist point of view, therefore, is that the client is not to be considered culpable. He is not to be blamed for his unfortunate circumstances. It may appear, of course, that clients engage in the formulation of rational, independent choices; but this, after all, is only an illusion, according to hard-core determinists. What appears to be free choice is itself a product of earlier influences, which may be a function of genetic endowment, physiology, child rearing, economics, politics, and an impressive number of other factors.

This conclusion means more, however, than that clients are not ultimately responsible for their problems. It also means that they are able to do little or nothing of consequence to ameliorate them. For

extreme determinists, the ability of individuals to make freely formed decisions about their futures is nonexistent. Whatever ability we have to change is merely the outcome of prior causes. The philosopher John Hospers has described this view succinctly:

The position, then, is this: if we *can* overcome the effects of early environment, the ability to do so is itself a product of the early environment. We did not give ourselves this ability, and if we lack it we cannot be blamed for not having it. Sometimes, to be sure, moral exhortation brings out an ability that is there but not being used, and in this lies its *occasional* utility; but very often its use is pointless, because the ability is not there. The only thing that can overcome a desire, as Spinoza said, is a stronger contrary desire; and many times there simply is no wherewithal for producing a stronger contrary desire. Those of us who do have the wherewithal are lucky.⁵

Acceptance of this conclusion would clearly throw cold water on both the mission and traditional methods of social work.

Proponents of the free will school of thought, alternatively, deny that the thoughts, emotions, and behavior of all individuals are, at all times, a function of prior causes over which individuals have little or no control. Adherents to this point of view generally fall short of claiming that no events are determined or that all events are truly random occurrences. Rather, they claim that some events follow from the exercise of free will or choice, that individuals do in fact have the capacity to behave independent of prior causes, though to varying degrees. As the ethicist Gerald Dworkin has noted, "The claim that we have free will is, then, the claim that for some actions at least the following condition is true: There is an alternative action (which may be simply refraining from the action to be performed) open to the agent. Put in the past tense after the agent has performed some action A: There was some alternative action which the agent could have performed other than the one which he in fact did."⁶ Formally, the following argument attempts to establish the notion of free will and deny determinism:

1. A necessary condition for holding a person responsible, blaming, or punishing him for an act, A, is that the person did A freely
2. If determinism is true nobody ever acts freely
3. Therefore, if determinism is true, no one is ever responsible, blameworthy, or punishable.
4. At least sometimes people are responsible, blameworthy, or punishable for what they do
5. Therefore, determinism is false.⁷

Recognizing that questions may be raised about the technical validity of this argument, it represents, in sharp relief, the doctrine to which determinists are opposed. And the implications of the conclusion of

this syllogism are far from trivial. They bear heavily on the willingness of social workers to exhort, motivate, and generally work hard with clients to bring about meaningful changes in their lives.

An alternative to extreme views of either free will or determinism, but which contains elements of both schools of thought, has become known in philosophical circles as the "mixed view" or "soft determinism." It is fair to say that currently the mixed view is the most prominent in circulation. It essentially entails three assumptions: (1) that the thesis of determinism is generally true, and that accordingly all human behavior—both voluntary and nonvoluntary—is preceded and caused by antecedent conditions, such that no other behavior is possible, (2) that genuinely voluntary behavior is nonetheless possible to the extent that it is not coerced; and (3) that, in the absence of coercion, voluntary behavior is brought about by the decisions, choices, and preferences of the individual himself.⁸ According to the mixed view, then, human behavior is neither wholly determined by external forces nor entirely random in nature. There is considerable room for voluntary action.

The Compatibility Argument

There is considerable evidence that the doctrine of soft determinism is relatively prominent in the profession of social work. In general, both the profession's literature and conventional practice wisdom embrace the view that the problems under which clients labor are frequently the products of circumstances beyond their control, to varying degrees, and that clients themselves are at times partly responsible for their difficulties and are—again, to varying degrees—capable of making thoughtful, rational, and voluntary decisions to alter the course of their lives. Florence Hollis has summarized this sentiment well: "The casework position, I would think, would not be that of absolutism in either direction. We certainly do not take the libertarian stand that each action of man is completely free and unaffected by his previous character, life history, or current experience. On the other hand, neither do we believe that all choice, all behavior is the determined, necessary and inflexible result of previously existing physical or environmental causes."⁹

This position is based on what philosophers generally refer to as the compatibility argument, according to which the free will and determinist views are not, contrary to first impressions, necessarily mutually exclusive. Rather, they can be complementary. This is a view that has been espoused over the years by such noteworthy philosophers as Thomas Hobbes, David Hume, and John Stuart Mill.¹⁰

The compatibility doctrine is thus in sharp contrast to the view of those who argue that to admit the possibility of free will is to deny determinism, and vice versa. According to the so-called incompatibilist, the world and its events cannot be explained by appealing to both the free will and determinism doctrines. As the philosopher Richard Taylor has observed with respect to the incompatibility thesis, "Ultimate responsibility for anything that exists, and hence for any man and his deeds, can thus only rest with the first cause of all things, if there is such a cause, or nowhere at all, in case there is not."¹¹

Though the predominant view in social work is generally consistent with soft determinism, it is nonetheless clear that there is considerable variation of opinion within the profession about the extent to which clients are truly victims of circumstances and prior determinants beyond their control, as opposed to willful actors who have brought their difficulties upon themselves. For example, in their recent review of the ideological assumptions, contained, either implicitly or explicitly, in introductory social work texts, Ephross and Reisch document considerable variation in authors' emphases on cultural, economic, political, and environmental determinants of social problems.¹² The texts fell generally into three groups: (1) those that attribute clients' difficulties largely to factors that are beyond their control; (2) those that stress the capacity of individuals to fashion their own lives and futures, while recognizing somewhat the effects of external factors; and (3) those that stand midway between these two positions, in that they acknowledge clearly "the connections between social work clients and societal forces and events."¹³ Though their discussion is not couched in the philosophical language of the free will-determinism debate, it is clear that Ephross and Reisch grasp the implications of the controversy for social work when they conclude that:

there are clear differences among the books reviewed as to social, political, and economic content, and it seems that these differences are quite important for the education of professional social workers. In a sense, one can distribute these introductory textbooks over an ideological spectrum. The temptation is to visualize such a spectrum as covering a range from "Left" to "Right." These terms are used a bit unconventionally here; they do not imply that the authors adhere to all of the political views commonly associated with Left or Right positions. Rather, the idea is of a scale whose polar points describe conceptions of the relationship between societal forces and individual experiences. The Left pole, then, encompasses the position that individuals' lives are circumscribed and heavily influenced, if not determined, by political, economic, and institutional patterns within society. The Right pole attributes to individuals and families a great deal of leeway to determine their individual and interpersonal experiences.¹⁴



As observed above, the impressive variation in social workers' opinions about the extent to which present and future circumstances are shaped

by voluntary versus deterministic factors has several noteworthy implications for professional practice. These implications can be placed generally into two categories. First, there are implications related to the views social workers have of the culpability and capacity of the clients with whom they work. Second, there are implications concerning the extent to which social workers believe clients deserve assistance.

The Culpability and Capacity of Clients

Though social workers are generally predisposed to identify and understand both individual and environmental determinants of clients' problems, it is evident that our views of the extent to which clients are responsible for their difficulties vary considerably. On the one hand are clients whose problems seem due to circumstances well beyond their control. These are clients who, we conclude, have not brought problems upon themselves. They are true victims. Infants who have been physically abused or neglected, people with congenital defects (such as physical deformities or mental retardation), and those who are diseased at birth are, by and large, regarded as clients who were dealt an unfortunate hand at the very start of life. They have not behaved in ways that we consider to have invited the serious problems from which they suffer.

At the other extreme are clients who, we are at least at times inclined to believe, have made voluntary decisions to lead their lives in ways that produce serious problems. Thus, able-bodied poor and unemployed who choose not to work merely because of their aversion to the task, drug abusers, and criminals are frequently viewed as clients who have, so to speak, asked for their troubles. Able-bodied poor could work, drug abusers could abstain, and criminals could cease and desist if they really wanted to. They have simply exercised their free will to the contrary. A true determinist, of course, would argue that there are reasons why these people have chosen their problem-laden lifestyles; they may suffer from a wide variety of intrapsychic maladies, economic obstacles, or political impediments that prevent them from behaving otherwise, though on the surface it appears that they have voluntarily chosen their current circumstances. However, though there may be some truth to the determinist's contentions in such cases, what is important is that many social workers see these clients as culpable—as exercising their free will—and this ultimately affects our professional response to them.

Between these two extremes, of course, are those who seem to straddle the free will—determinism fence. These are the clients about whom

we are most ambivalent. In their cases we tend to feel torn, caught between an intellectual understanding of the factors that may have brought about their distress and the frustration of feeling that they may have themselves contributed voluntarily to the problem in a significant way, or not done enough to remedy it. With juvenile delinquents, for example, social workers have helped blaze a long-standing trail of theory constructed to account for youthful mischief. There is by now a familiar litany of factors cited to "explain" juvenile delinquency, broken homes, child abuse, inferior education, poor role models, exposure to drugs, and so on. However, despite our intellectual understanding of the antecedents or determinants of delinquency, many of us nonetheless are tempted to hold many of these youths responsible for their misbehavior. If they would only care enough about themselves, think about their behavior and the feelings of others more carefully, and take a critical look at their own values, they could surely mend their ways. In the final analysis, it is tempting to think that the fault may be theirs. We sometimes think similarly about certain aged clients, for example, whose forgetfulness, clumsiness, and poor hygiene may annoy us; though their increasing frailty may "explain" their behavior, it is at times tempting to believe that these nuisances could be relieved considerably if they would only try harder. The same holds for those clients who now make up a very substantial portion of the social work profession's caseload: those who are experiencing one or more of a wide range of emotional difficulties, such as poor self-esteem, marital conflict, depression, loneliness, or some generalized form of anxiety

The Boundaries of Moral Responsibility

The form and extent of the assistance that social workers choose to provide for their clients are influenced in important ways by the degree to which they hold their clients responsible for their problems. In this respect, there is a close relationship in social work between the concepts of moral responsibility and moral desert.

The concept of moral responsibility implies that individuals can, or ought to be, held accountable for their problems and mischief. Of course, to assert such a claim is to embrace, at least partially, the notion of free will. It would, after all, be irrational to argue that an individual whose problems are entirely due to factors beyond his or her control (hard-core determinism) is one who should, at the same time, be held accountable for them. To attribute fault or blame in such cases would fly in the face of logic as we know it. As David Hume observed in his eighteenth-century work, *A Treatise of Human Nature*:

'Tis only upon the principles of necessity, that a person acquires any merit or demerit from his actions. Actions are by their very nature temporary and perishing; and where they proceed not from some cause in the characters and disposition of the person, who perform'd them, they infix not themselves upon him, and can neither redound to his honour, if good, nor infamy, if evil. The action in itself may be blameable. . . But the person is not responsible for it; and as it proceeded from nothing in him, that is durable and constant, and leaves nothing of that nature behind it, 'tis impossible he can, upon its account, become the object of punishment or vengeance.¹⁵

Yet, though there may be general agreement within the profession that clients whose problems are due to circumstances beyond their control should not be held responsible for them, there is much less clarity about what factors determine whether an individual is truly a victim or not.

Centuries ago, Aristotle argued that an individual is responsible only for those actions that are voluntary in nature. According to Aristotle, there are two principal ways in which an action can fail to be voluntary, it can be the result of compulsion, or it can be carried out in ignorance.¹⁶ Thus, if an oncoming and recklessly driven auto forces you off the road, and in doing so causes your passenger to be injured, you have been compelled—due to circumstances we would ordinarily consider to be beyond your control—to act as you did. We would not be likely to hold you morally responsible for your passenger's injuries. Further, if there were some latent defect in your living room chair, and a guest fell from it and harmed himself, common sense suggests that you should not be held at fault.

A persistent problem, however, is that while there may be some general agreement that coercion and ignorance preclude the assignment of moral blame, social workers (and others) have had little success reaching agreement about what, in fact, constitutes genuine coercion and ignorance. Take the problem of poverty, for example. There is at least a general predisposition in the profession to identify the following factors as explaining why many people are poor: poor education, racism and discrimination, Western capitalism, single-parent status, poor health and nutrition, and a host of related liabilities. But, can we say that these factors—acting independently or in concert—constitute coercion and ignorance in the strict sense? It is not hard for us to agree that a gun held at our back or organic brain disease constitute coercion (though in different forms). But what of factors that are, at least according to conventional wisdom, highly correlated with poverty? Is it reasonable to assert that these factors compel or coerce individuals into poverty? Further, what, if any, distinctions should we make between intraindividual factors (physiological or psychological), which can be coercive, and extraindividual factors? Clearly, the degree to which we view poverty as a voluntary or coerced state

has profound implications for our response to it. As the philosopher J. J. C. Smart observed in an essay on the concepts of free will, praise, and blame:

When, in nineteenth-century England, the rich man brushed aside all consideration for his unsuccessful rivals in the battle for wealth and position, and looking at them as they starved in the gutter said to himself, "Well, they had the same opportunities as I had. If I took more advantage of them than they did, that is not my fault but theirs," he was most probably not only callous but (as I shall try to show) metaphysically confused. A man who said "Hereditv and environment made me what I am and made them what they are" would be less likely to fall a prey to this sort of callousness and indifference. Metaphysical views about free will are therefore practically important, and their importance is often in inverse proportion to their clarity.¹⁷

A related problem concerns confusion about the distinction between holding clients morally responsible for actions that they engage in and actions that they *fail* to engage in. Child abuse, for example, is an act of commission for which we are ordinarily inclined to hold individuals at least partly responsible, though we may, to some extent, be able to identify reasons that explain their behavior. Child neglect, on the other hand, is an act of omission. Thus, it appears that the free will–determinism debate bears on failures to act, in addition to the more common concern social workers have with clients whose acts of commission draw attention.¹⁸

Ordinarily, three preconditions must be satisfied in order to hold an individual liable for his or her actions or inaction. First, it must be established that the individual committed the harmful act, or at least that the action or omission made a substantial contribution to it. Second, the individual's conduct must have been in some way faulty. Finally, it must be established that there was a causal connection between the faulty conduct and the reprehensible outcome.¹⁹ Granted, it is often difficult to establish the presence of these preconditions in social work. The evidence is not always adequate to determine that a client did commit or failed to commit the act of interest. Further, it is often hard to know whether the conduct was in fact faulty and led to, in a causal way, the regrettable outcome. Nonetheless, practitioners do, in their day-to-day work, make such judgments about moral responsibility, and these judgments affect the form and content of our responses to clients' problems. As I will discuss below, our judgments about what clients deserve are frequently predicated upon our attributions of moral responsibility.

The Concept of Desert

The concept of desert has a variety of connotations, both in general and in the profession of social work. These connotations may be positive,

as in the case of awarding prizes or rewards for athletic, artistic, or scholarly achievements, or negative, as in the case of penalties or punishments imposed for misbehavior. Clients may deserve to be rewarded, such as when residents of a group home are awarded additional privileges following a period of good behavior, or penalized, such as when a client's unemployment benefits are discontinued due to the reporting of false information. The concept of desert can also have relatively neutral connotations, such as when retirement or workers' compensation funds are distributed to those who deserve them. Therefore, the concept of desert is closely related to both retributive and distributive justice. Retributive justice is concerned with penalties and rewards. Distributive justice is concerned with allocating services and resources.²⁰

The free will–determinism debate, as it pertains to social work, is most closely related to issues of retributive justice. That is, the extent to which practitioners are likely to reward or penalize clients is likely to be a function of their beliefs about the degree to which clients are responsible for their behavior or problems. Consider, for example, our response to criminals. Those of us who believe that armed robbers are rational individuals who voluntarily decide to assault their victims are tempted to endorse the imposition of penalties, in the name of punishment, retribution, and, perhaps, deterrence. Justice demands that the perpetrator be held accountable to the community for his or her misdeeds. Immanuel Kant is ordinarily credited with the classic statement concerning this so-called retributivist point of view:

But what is the mode and measure of punishment which public justice takes as its principle and standard? It is just the principle of equality—by which the pointer of the scale of justice is made to incline no more to the one side than the other. It may be rendered by saying that the undeserved evil which any one commits on another, is to be regarded as perpetrated on himself. . . . This is the right of retaliation (*jus talionis*); and properly understood, it is the only principle which in regulating a public court, as distinguished from mere private judgment, can definitely assign both the quality and quantity of a just penalty.²¹

A strict determinist, however, would make no such demands; unpleasant but compelling reasons can be found to explain the offender's behavior. It is simply inappropriate to conclude that the offense was the product of rational free will. As the attorney Clarence Darrow once said to inmates confined in Cook County (Chicago) Jail: "I do not believe in any sort of distinction between the real moral conditions of the people in and out of jail. . . . I do not believe that people are in jail because they deserve to be. They are in jail simply because they cannot avoid it on account of circumstances which are entirely beyond their control and for which they are in no way responsible."²² An excerpt from John Hospers's classic essay, "What Means This Freedom?" summarizes suc-

cinctly the determinist's position on this issue as viewed through the philosopher's lens:

There are many actions—not those of an insane person (however “insane” be defined), nor of a person ignorant of the effects of his actions, nor ignorant of some relevant fact about the situation, nor in any way mentally deranged—for which human beings in general and the particular are inclined to hold the doer responsible, and for which, we say, he should not be held responsible. . . . Let us take as an example, then, a man who, let us say, strangled several persons and is himself now condemned to die in the electric chair. Jury and public alike hold him fully responsible (at least they utter the words “he is responsible”), for the murders were planned to the minutest detail, and the defendant tells the jury exactly what he planned them. But now we find out how it all came about; we learn that the man who rejected him from babyhood, of the childhood spent in one foster home after another, where it was always plain to him that he was not wanted, that the constantly frustrated early desire for affection, the hard shell of non-responsiveness and bitterness that he assumed to cover the painful and humiliating feeling of being unwanted, and his subsequent attempts to heal these wounds by the shattering of his ego through defensive aggression.²⁹

A final comment is in order on the concept of desert and its relation to social work. Though our beliefs about the victimization of the poor frequently lead us to conclude that they should not be held accountable for their actions (and therefore deserve assistance) on occasion our sentiments about particular clients' moral worth can taint our judgments and these convictions. Social workers' long-standing involvement with the poor illustrates this point. The profession has, generally speaking, been cognizant of and sympathetic to the reasons why people are poor. We are painfully aware that physical and mental disabilities, entrenched racism and discrimination, cyclical and structural unemployment, and age—factors over which individuals ordinarily have much control—account for the lion's share of those who are poor below the official poverty line. The percentage of poor who are physically disabled is impressively low. Nonetheless, there can be in many professional social work circles at least a subtle contempt for the poor, a feeling that, despite all we know, many of these people are neither appreciative nor, perhaps, are worthy of our various services and ministrations. In some instances, our latent resentment toward our clients casts a shadow on our intellectual understanding of them as victims. The philosopher Harry Frankfurt commented on this in an essay on the subject of coercion and moral responsibility.

We do on some occasions find it appropriate to make an adverse judgment concerning a person's submission to a threat, even though we recognize that he has genuinely been coerced and that he is therefore not properly held morally responsible for his submission. This is because we think of him as a person, although he was in fact quite unable to control a desire,

have been able to control it. . . . It may be that we have a low opinion of someone who is incapable of defying a threat of the kind in question, and our judgment that he ought to have been able to defy it may express this feeling that he is not much of a man. This has nothing to do with judging him as deserving blame—if he should feel anything, it is not guilt but shame—and it is entirely compatible with the belief that he had actually no choice but to do what he did. Indeed it depends upon this belief. It is just because we recognise that we cannot expect better from him that we hold him in a certain contempt.²⁴

The Paradox of Determinism

My comments thus far have concerned the implications of the free will—determinism debate for the views social workers have of the culpability, capacity, and worthiness of clients. It is important to note, however, that frequently issues related to free will and determinism bear on clients' views of themselves, their interpretation of past events, and their fantasies about the future. A letter that I recently received from an inmate with whom I once worked in a state penitentiary illustrates this. This young man is serving a sentence for murder. During the course of our work together we had spent some time speculating about why he killed the people he did. His case was complicated by the fact that he was under the influence of potent drugs at the time of the murders.

The history of abuse and neglect to which this fellow had been subjected as a child is filled with a series of disconcerting events. Listening to his life story, it is no surprise that he followed a wayward path. Yet until the night when he murdered neighbors he barely knew—for no apparent reason—he had committed no serious acts of violence and had had only minor brushes with the law. He too found something terribly mystifying about his crime. In the end, he could not help but wonder whether he is ultimately responsible for what he had done. "In my own case," he wrote, "I didn't want to kill anyone, didn't intend to, and realized I had done so only after it was done. I guess that's why I hate myself. Because I lost control of myself while on drugs and killed three people. It's simple to say, well, I was on drugs and didn't know what I was doing. But then no one forced the drugs on me. I took them on my own free will. So who's to blame?"

One of the ironies of social work is that both members of the profession and their clients tend to embrace simultaneously both the free will and determinism doctrines. On the one hand, we persistently pursue the discovery of grand psychological, sociological, political, and economic theories that will enable us to fully grasp how and why people become

plagued by (or plague themselves with) problems in living. If we were in fact successful in our quest for full understanding, we would have, by definition, established a chain of causal connections between antecedent conditions or events and the problems under which people labor, thereby establishing the validity of determinism. Yet, the implications of such determinism for a profession such as social work are profound, given the earnestness of our collective belief that individuals have a considerable capacity to shape their lives and futures. We frequently view clients' problems deterministically—attempting to locate intra- and extraindividual factors that account for problematic behaviors and attitudes—yet our forms of intervention spring from assumptions about free will and self-determination.²⁵ As Tolstoy once noted regarding this paradox, "The problem of free will from earliest times has occupied the best intellects of mankind and has from earliest times appeared in all its colossal significance. The problem lies in the fact that if we regard man as a subject for observation from whatever point of view—theological, historical, ethical or philosophic—we find the universal law of necessity to which he (like everything else that exists) is subject. But looking upon man from within ourselves—man as the object of our own inner consciousness of self—we feel ourselves to be free."²⁶ There is thus an enduring tension between our desire to understand and explain human affairs by uncovering detailed causal connections and our need to see ourselves, and others, as autonomous individuals who are not subject entirely to intrapsychic, biological, and environmental factors that lie beyond our control.

Throughout the history of social work there has been some shift between our emphasis on free will and determinism, largely as a function of the passage of broader political, historical, and philosophical world views. For example, there was considerably more emphasis on the moral culpability of clients during the heyday of the Charity Organization Society than during the subsequent growth of the settlement house movement. This was the result of a growing recognition that poverty and its correlates are frequently the result of external determinants, not failures of individual character.²⁷ The politics of the Progressive Era were in sharp contrast to those that sanctioned and encouraged the nineteenth-century free market philosophy that depended heavily on assumptions of free will, self-determination, and individual autonomy. The disconcerting events of the Great Depression of the 1930s also shifted considerable weight toward the determinism side of the scale, as did the popularization of Marxism and the noteworthy influence of Freudian views of human behavior that captured the attention of the social work profession. Currently, we appear to be in the midst of a partial ideological shift away from determinism—at least as reflected by contemporary social welfare policies promulgated by federal and state politicians, legislators, and administrators—toward the view that

many of our domestic problems (e.g., poverty, crime) could be solved if only we had the (free) will to confront them.²⁸

The main point is that these broad shifts in world view have always managed to plant ideological seeds in social work, and the outgrowths have had significant effects on the resources available to and strategies of the profession's practitioners. In general, the greater the emphasis on determinism, the greater social workers' emphasis on social change has been; the greater the emphasis on individual autonomy and free will, the greater the profession's emphasis on casework and client self-determination. As the philosopher R. F. Stalley has observed, "the main effect of the acceptance of a doctrine of determinism with all its implications would probably be to turn the attention of social workers away from casework with individuals to other kinds of social action. . . . If, on the other hand, human behaviour is not determined by the environment there will still be some problems, however much the environment is improved, and only work with the individual could help to solve these."²⁹

It is essential for social workers to appreciate the implications of their embrace of the free will or determinism doctrines, whether in their extreme or moderate forms. The views we develop of our clients' moral responsibility and capacity for change are a function in large part of the position we take in the free will–determinism debate. It is unlikely, of course, that this debate will ever be fully resolved. As Tolstoy noted, there is something compelling about both theses. There is incontrovertible evidence that much of human action is affected by forces that extend beyond individual control and choice. Nevertheless, it is hard to imagine that determinism does not have limits, that human beings do not in fact maintain some degree of nontrivial control over their own lives, even if some of what we call autonomy is an illusion.³⁰

The physical and natural sciences by now have an impressive collection of data and theories that explain large numbers of phenomena in our world, a record that surpasses by far the accomplishments in the social sciences. Laplace's early observations concerning particle mechanics in physics served as the forerunner of a proliferation of deterministic accounts of both physical and social events. However, despite the noteworthy achievements of the world of science, when we aggregate our findings we have failed to explain adequately many of the phenomena about which we care most. We still know distressingly little, for example, about why some people neglect their children, abuse drugs, become depressed, commit crimes, and take their own lives. Our multivariate analyses frequently turn up little beyond the obvious, ultimately explaining, in too many instances, a discouragingly small percentage of the variance in our dependent variables. We know a lot as a result of our decades of empirical inquiry, but we must recognize that the boundaries that enclose our current knowledge are still relatively

narrow. We are far from a true determinist's understanding of the world in which we live. And, as the Oxford philosopher Anthony Kenny has reflected, there must be a certain modesty in our expectations:

One may query whether we have any reason to believe that there can be a successful science of human behavior; but this response will no doubt appear unhelpful and pessimistic. It may be more productive to inquire from what features of the history of scientific progress one is supposed to extrapolate. Is one to point to the success of deterministic explanation in Newtonian mechanics, or to its lack of success in stimulus-response psychology? It is impossible not to be impressed by the present availability of mechanistic explanations for many physical phenomena which were explained teleologically until the time of Descartes. But perhaps one should be no less impressed by the continuing impossibility of explaining, in terms of sufficient antecedent conditions, any psychological phenomenon which would have been regarded as voluntary in the time of Aristotle.¹

The intractability of the free will–determinism debate has led to some unfortunate frustration in our efforts to understand life's events and design responses to them when problems arise. But the persistence of the debate has also taught us important lessons. Controversies that remain unresolved after centuries of sustained attention rarely concern trivial matters. The free will–determinism debate endures because it entails concepts that are fundamentally important. Even if our labored attempts to resolve this debate do not settle the controversy, we will have, in the process, addressed ourselves to matters that represent the heart of our profession. In the final analysis, social workers will likely continue to espouse a mixed or soft view of determinism, believing both that clients' problems are, to a considerable extent, the products of prior causes, and that the voluntary action of clients can contribute to their problems and help to solve them. Assuming this to be so, the personal conclusions we reach about the moral responsibility and capacity of clients (whether voluntarily or as a result of our own historical antecedents) stand to have significant consequences for the people with whom we work.

Notes

1 *Time* (October 4, 1982), p. 6

2 Florence Hollis, "Principles and Assumptions Underlying Casework Practice" (lecture delivered at United Nations seminar for the advanced study of social work, cited in R. F. Stalley, "Determinism and the Principle of Client Self-Determination," in *Self-Determination in Social Work*, ed. F. E. McDermott [London: Routledge & Kegan Paul 1975], p. 93)

- 3 "General Introduction," in *Free Will and Determinism*, ed. Bernard Berofsky (New York: Harper & Row, 1966), p. 3.
- 4 Ernest Nagel, "Determinism in History," in *Determinism, Free Will, and Moral Responsibility*, ed. Gerald Dworkin (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1970), p. 5.
- 5 John Hospers, "What Means This Freedom?" in Berofsky, ed., p. 40.
- 6 "Introduction," in Dworkin, ed., p. 6.
- 7 For discussion of this argument, see Dworkin, ed., pp. 5-9.
- 8 See, e.g., Richard Taylor, *Metaphysics* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1963), pp. 43-44.
- 9 Hollis (n. 2 above), pp. 106-7.
- 10 See Carl Ginet, "Can the Will Be Caused?" *Philosophical Review* 71 (1962): 49-55.
- 11 Taylor (n. 8 above), p. 36.
- 12 Paul H. Ephross and Michael Reich, "The Ideology of Some Social Work Texts," *Social Service Review* 56 (1982): 273-91.
- 13 Ibid., p. 280.
- 14 Ibid.
- 15 David Hume, *A Treatise of Human Nature*, bk. 2, pt. 3, sec. 2.
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- 21 Immanuel Kant, "Justice and Punishment (continued)," in Ezorsky, ed. (n. 20 above), p. 104.
- 22 Quoted in "Introduction," in Dworkin, ed. (n. 4 above), p. 1.
- 23 Hospers (n. 5 above), pp. 26, 33.
- 24 Harry G. Frankfurt, "Coercion and Moral Responsibility," in *Essays on Freedom of the Will*, ed. Ted Honderich (London: Routledge & Kegan Paul, 1973), p. 79.
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26. Quoted in Anthony Kenny, "Freedom, Spontaneity, and Indifference," in Honderich, ed. (n. 24 above), p. 89.

27. See Allen F. Davis, *Spearheads for Reform* (New York: Oxford University Press, 1967), pp. 18-20.

28. See David Stoesz, "A Wake for the Welfare State: Social Welfare and the Neo-conservative Challenge," *Social Service Review* 55 (1981): 398-410, and Frederick Reamer, "Social Services in a Conservative Era," *Social Casework* (in press), for discussion of the conservative shift in social welfare policy in the United States.

29. Stalley (n. 2 above), p. 104.

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Notes on Policy and Practice

Case Records: Fact or Fiction?

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Case records and recording practices are an important but ignored part of social casework. Early social workers were critical of the methods of case recording and wrote extensively about the difficulties in determining valid, unbiased information. Today, the case record is taken for granted as both factual and objective. This article challenges the factuality of case records and explores implications for clients of social service agencies.

Records and record-keeping systems have been a part of human history for as long as we have been able to write, count, catalogue, and store. With the invention of the typewriter at the turn of the century, records and record keeping practices received their first major technological impetus. Burton J. Bledstein goes so far as to call it the first stage in a communications revolution that seemed to imbue written words with a special power. "To place an opinion in writing was to make it final, commit the writer to its veracity, document a position, and submit that position to a third party and even subject it to legal action. Written words, by their very nature, make people hesitate and seriously consider their thoughts and possible actions. . . . A document filed away for permanent reference could be recovered at any future date and be used to damage irreparably a person's reputation."¹

Bledstein characterizes this period in American history as obsessed with words: "A man was his word or the words others used about him."² Doctors, lawyers, teachers, dentists, engineers, chemists, morticians, social workers, civil servants of all kinds staked out their respective

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territories, evolved codes of ethics, laid claim to bodies of scientific knowledge, and set about convincing the rest of the populace through newspapers, magazines, books, and other print media that expert authority resided with them. Of course, Americans' fascination with the advances already achieved by science and technology helped to support these claims, while the educational system with its increasingly higher levels of expertise (e.g., master's degree, Ph.D., professional associations, and distinguished titles) helped to create an aura of "professionalism."

In order to understand the special significance of record keeping to the emerging profession of social work, it must be remembered that early social workers had to rely heavily on the knowledge and scientific respectability of medicine. In fact, the founders of social work adopted the medical (disease) model of study, diagnosis, and treatment, and referred to this methodology as social casework. Social casework's claim to expertise was that it applied the medical model to social problems through the process of obtaining social histories, diagnosing individual and family malfunctions, and prescribing a course of action to resolve those problems.

As a result of its association with medicine, social casework gained increasing respectability, and with the advances made in psychology and psychiatry was eventually viewed by the public as a legitimate helping profession.³ While medicine was crucial to social work's achieving scientific respectability, it was the legal profession that provided early social workers with case-recording guidelines, techniques of investigation, and methods of distinguishing between real and testimonial evidence, inference and fact, and circumstantial evidence and hearsay. For Mary Richmond, the foremother of social work, the purpose of the case record was to gather "social evidence" in order to make a "social diagnosis."⁴ It must be remembered, too, that early social workers were employed by courts and charity organizations as home visitors (investigators) to spread benign moral influence for charities and gather family information for the courts. It was Mary Richmond's intention to establish a separate identity for social work and expand its professional role by borrowing the language and procedures of both medicine and law. This combination was to produce "social evidence" via social workers doing investigations and using legal rules of evidence as guidelines. Theoretically, the evidence was then submitted in the form of the case record to a medical-like scientific analysis for diagnosis and prescription. According to Richmond:

All these streams of experience, the judicial, the psychological, and the medical—are modifying social case work profoundly, and as indicated earlier are being modified by it in turn. . . . The explanation of this lies in the fact that long established professions cast a long shadow. They have their traditions, their routines of procedure, their terminology, their sense of professional solidarity. Social work has few of those things. When therefore, the doctor or judge

receives social workers as an adjunct to this court or clinic, he may have but a dim idea of the distinctive contribution of authenticated and interpreted social facts which they should bring to his professional work'

Social work's unique contribution to the other more established professions was to be the authenticated and interpreted "social fact." The logical place for these social facts to be amassed was in the case record. Bristol makes the connection explicit when she writes, "Some form of case record has been associated almost universally with social case work."⁶ In her opinion, record and method are inextricably linked. The record contains authenticated and interpreted social facts revealed by the method of social casework to provide evidence for diagnosis and prescription.

It is my contention that the evidentiary nature of the case record remains very much a part of the casework process, and despite our good intentions has the potential to harm those we are trying to help. Although psychological terminology and concepts have replaced the old rules of evidence in many areas of social work recording today, case records still are used by courts, clinics, and welfare departments for the express purpose of social control. Case records are admissible in a court of law, but their facticity and objectivity often go unexamined by both the courts and the profession. With power of documentation comes the power to regulate and control individual and family behavior through the implied or actual threat of evidence contained in the case record. Families can be broken up, parolees sent back to prison, and welfare benefits denied.

Every day social workers employed by a variety of public and private helping organizations, some with professional degrees, many with only on-the-job training, compile written reports; make entries; complete numerous organization forms, referrals, fact sheets, and applications; take social histories; make diagnoses and recommendations, and offer written opinions and advice. Stenographers dutifully type and file most of the above. Seldom do we think about the kinds of information that are included in records. Even less do we anticipate the uses of such information for the future. Because records are intended to survive, it is very important that social workers be aware of what they write, for whom, and for what purpose. First, however, it is necessary to understand why social facts in case records have such an aura of certainty.

Social Facts and Scientific Social Facts

Émile Durkheim, the founding father of sociology, defined social facts as "things" that exist independent of individual subjective consciousness.

He grounded the reality of these things (social phenomena) in society, which exists over and above the individual and exerts coercion and control over the acting, thinking, and feeling of individuals.⁷ For example, Durkheim believed that social phenomena, like crime, divorce, suicide, and poverty, could be studied and explained by the counted instances of such behavior as reflected in various official statistics of police departments, licensing bureaus, coroners' offices, and welfare departments. He suggested that by examining the social facts, that is, the similar characteristics of those individual cases after the official determination of suicide, robbery, or welfare assistance, it was possible to establish functional and causal relationships between these categories of social facts. Scientific hypotheses could then be proven or disproven by the existence of the statistical facts. Durkheim's model of social science research became the accepted method of research practice for American sociologists, and case records became an important source of scientific hypotheses and proof. Unlike Mary Richmond, who was aware of the subjective pitfalls of case records and established legal and documentary criteria for the "authenticated" and "interpreted" social fact, Durkheim accepted these official judgments as objective and proceeded with his research.

Many other pioneering and well-intentioned social workers adopted this model of social research, counting case records, compiling statistical tables, and creating poverty and dependency indexes from the case records in order to bring to the attention of the public the extent of social problems in America. They advocated developing "basic information on the extent of poverty before tackling the 'deliberate and difficult' work of uncovering the causes."⁸ The compilation of accurate statistics by official agencies was considered the first step. More significantly, however, for future generations was the combined impact of Richmond's and Durkheim's perception of the social fact as self-evident, unproblematic, and appropriate subject matter for the application of the scientific method.

Given the scientific ethos of the period, any research methodology that was able to start with official quantitative facts and use them as evidence for what should be done was bound to draw support from a struggling profession eager to attain scientific respectability. From past to present, case records and social science research have generally had a mutually supportive and rewarding association. This has been due in part to the assumptions taken for granted by social workers and researchers regarding the factuality of case records, their mutually validating identities as experts, and the technical intricacies of their professional knowledge.

Matilda White Riley has stated that "Medical, psychoanalytic, or social work case records may serve as 'expert' records of complex human relationships and processes, affording insights not open to the

lay investigator who himself attempts to gather such technical material."⁹ By viewing the case record as accurate and valid, researchers not only unquestionably accept the expert judgments and observations made in the case record, but by applying their own brand of scientific methodology, that is, random sampling, coding procedures, and statistical manipulations, scientifically validate those judgments. This research will be read and absorbed by students of those same "expert" professions. Erving Goffman called this a looping strategy.¹⁰ William Ryan identified it as blaming the victim.¹¹ The result, however, is the same for clients. Case records, whether we like it or not, reify our negative perceptions of clients in a self-fulfilling cycle of professional observation and research.

To further illustrate the problematic nature of social science research based on equally problematic social facts contained in case records, it is instructive to review early attempts by Mary Richmond and others to establish an "authenticated" social fact. Mary Richmond, in the appendix to her classic text, lists an impressive number of reliable sources that social workers can consult when attempting to validate information. She lists the church, employers, landlords, friends, lawyers, other social agencies, police, courts, prisons, immigration officers, school officials, relatives, unions, and hospitals.¹² In the text itself, she establishes a continuum of sources from the least reliable, such as relatives, friends, and employers, who may harbor a grudge, to the most reliable, the records of other agencies. As in the research process itself, it is again assumed that the facts of public records offer the most reliable information, even though she, herself, laments the inadequacies, incompleteness, and subjective conjectures of social work records.¹³

Admitting that social investigation lacks the rigor of social research, Richmond openly acknowledges the subjective elements of case records, placing responsibility where it belongs. "It is the worker's very awareness of his special predispositions on which depends the reliability of his observation and judgment."¹⁴ If this is true, then research to date, using case record material, may reflect more about the social workers' predispositions than about the realities of their clients. Clearly though, early social workers were concerned about the quality of case records and recognized the need for direct evidence rather than moralistic judgments and supposition. In the words of Margaret Bristol, "Case records are frequently lifeless, colorless and devoid of those elements which give the reader a feeling that the client and his associates actually lived. Such records often contain a plentiful supply of adjectives and descriptive phrases but few concrete incidents to support them. The need and value of direct evidence, that is primary facts, as an aid to the reader in visualizing the situation accurately has been brought out by several writers."¹⁵ Would she find them significantly different today? Written case records supposedly objectify subjective impressions through language. Nevertheless, such impressions, while typewritten, bound,

and stored, gloss over many of the subjective human qualities of the authors.

There are many, I am certain, who would argue that social workers are well aware of the subjective nature of case records, but why then would a topic of such historical and practical importance to social workers have been so completely ignored in textbooks, teaching, and social work scholarship?¹⁶ The tendency for most social workers is to view case recording and records as a necessary evil—necessary in the sense that case records provide continuity in treatment and allow social workers to detect patterns of behavior and record progress, but not in that the service organizations and managers use them to supervise caseworker performance, set work-load expectations, and monitor results on the basis of recorded information. Increasingly the primary historical function of case records, that is, the documentation of treatment, has been subsumed by current interests in professional accountability and competence and the measurement of organizational and professional effectiveness.¹⁷ But in order to understand why this has occurred it is necessary to look at some other factors.

Social Work and Social Control

Fortunately, some researchers have begun to question the relationship between official information, the case record, and the social control of deviants. Jack Douglas, a sociologist and keen observer of American social life, writes, "By becoming the legally-sanctioned creator and controller of social information and by making that social information the legally sanctioned basis for individual accountability (guilt, family responsibility, etc.) and social decision-making, the state has steadily increased its powers throughout society."¹⁸ Recognition that the power to record precedes determinations of deviance has brought about changes in the standard, quantitative, deductive methods of social science research.¹⁹ Using qualitative research methods not reliant on statistical abstraction, labeling theorists, for example, are studying the effects of diagnostic labels on the actual production and maintenance of deviant behavior.²⁰ What they have discovered is that social facts can no longer be regarded as simply self-evident but a complex product of social interaction between objective and subjective reality. Increasingly social reality itself is being viewed for research purposes as an ongoing accomplishment, a social construction that individuals make real by organizing their activities in ways to routinely confirm for each other "real" existence. In other words, reality itself is not some objectively timeless, mutually understood and known entity but an ever-changing

pattern of meanings that people construct daily from their past experience or cultural heritage, present knowledge and experience, and future possibilities. What is taken for real is seen theoretically as a complex process of negotiation between individuals, which common sense and the normal routines of daily existence give an objective, factual character. This means that the power to define something as real takes on new significance. Hence, many researchers are looking at how official statistics are generated,²¹ how social and organizational processes influence what will become a social fact, and who makes the decision as to what is deemed a social fact and why.²²

Social workers themselves have recognized their often difficult role as the "gatekeepers" to needed social services,²³ their advice/control function,²⁴ and their discretionary power to regulate individual behavior, as in probation and parole.²⁵ But they have generally ignored the way in which the case record has evolved as the necessary adjunct of that discretionary authority.²⁶ The social control functions of the police, the courts, prisons, and mental hospitals are obvious and well documented.²⁷ Lesser-known and recognized are the social control functions of welfare departments and child welfare services and the role the case record plays in controlling the behavior of those receiving service.²⁸

Records, to a great extent, determine who gets welfare and who does not, who gets probation and who does not, who gets charged with neglect and who does not, and who receives training, day care, public housing, and food stamps. Although it is within the agency's authority to give or withhold services, to violate or prosecute offenders, it is in many instances the social worker who provides the necessary documentation (evidence) allowing the agency to act. Clients of these agencies know what they have to say, do, and be able to prove, and as a consequence are controlled to the degree that they need the service or are under scrutiny.

In order to understand how case records act as an effective means of social control, the traditional conception of affective and moral neutrality by our official agencies must be challenged and the relationship between official facts and social control understood. For example, Piven and Cloward examined the historical relationship that has existed in this country between periods of civil disorder and the rise of welfare legislation and benefits. They maintain that our free-enterprise system, with its complement of social welfare agencies, not only regulates the numbers of workers available to do the dirty, demeaning jobs in society, but also controls civil disorder caused by periods of economic recession and unemployment by increasing or decreasing welfare benefits and social programs.²⁹ Donzelot, a French social historian, provides a similar historical picture of the social services professions and agencies in France by linking the emergence of social workers (assistants) after the French Revolution to the government's need to regulate the behavior

of the lower classes, perceived to be indolent, ignorant, promiscuous and diseased. Donzelot analyzed the process whereby official agents of the government, that is, social assistants, were given the task of convincing lower-class families to change their moral habits and repel their diseases, and, under the guise of moral laxity, forcing them to work.³⁰

The problem of social control in any democracy is that the restrictive measures taken by a government like ours to ensure law and order and a ready and willing work force, must rely heavily on the government's ability to convince, cajole, and persuade the majority of people that not only that such measures are necessary but that the politician's motives are altruistic.³¹ Another major reason that social science research and case records have been seen for so long as unproblematic and as almost certain knowledge is their direct relationship to public conceptions of official information and professional expertise. The traditional view of the role of official agencies, like courts, prisons, and welfare departments, is that they operate in a vacuum of moral, political, and affective neutrality for the express purpose of protecting society and rehabilitating errant individuals.³²

To make prisons, mental hospitals, and welfare agencies appear benign, that is, morally and affectively neutral, illusions of treatment, rehabilitation, and retraining must be defended vigorously.³³ Case records, criminal records, psychiatric records, and official statistics are the evidence most frequently cited to justify the continued mandate of the service organization and the continued infringements on basic freedoms of the people served.³⁴

This is not intended as an indictment of all helping efforts, but as a reminder of the contradictory nature of the mandates given service bureaucracies, the role case records play, and the practical necessity of maintaining illusions that comfort service providers and the public.

The point is that records are not kept on everyone. And even case records are kept only on a special segment of the population, most often the poor, the unemployed, the infirm, the disabled, and the criminal. It is beyond the scope of this paper to examine the problem of social order or the need for social control in any depth. Suffice it to say that these categories of people, requiring the cash assistance and services of an agency, have been historically regarded as not sharing the same values, attitudes, and beliefs of the overall society and, at worst, as being immoral, dangerous, and a threat to social order. They are perceived as a threat because they present a drain on scarce community resources and because their existence challenges sacredly held beliefs such as the work ethic, personal independence, private property, and the idea of justice for all. In short, we are all taught to play by certain social and moral rules, and if we violate those rules we can expect to be socially stigmatized or punished depending on the severity

of the infraction. Criminals are sent to jail, and welfare recipients are sent to a kind of moral infirmary to be processed and rehabilitated. Deviance from commonly held values and beliefs is equated with disorder and thus constitutes a threat to the commonly shared morality, that is, the American dream. Something must be done about them, or that dream becomes transparent.

Again, researchers have disagreed over how these moral rules are constituted and enforced. At one time, social scientists believed that norms of social behavior could be readily identified by the members of a society and that these norms guided behavior unless there was something "pathologically" wrong with the individual. More recently, however, researchers have begun to question this absolutist conception of social rules and view them and their application as more problematic and situationally determined.³⁵ The significance of this for writing in the case record is that not only are social workers predisposed toward the commonly shared values, attitudes, and beliefs of the larger society (i.e., blaming the victim), but the problematic and situational nature of determining actual or potential rule violations in a case of child neglect, for instance, is made infinitely more difficult by the lack of concrete rules to follow. This may account for the "pressure cooker" atmosphere of so many social work jobs in welfare agencies, mental hospitals, and prisons.

It appears that society has given the unenviable task of interpreting moral values and enforcing individual standards of behavior to social workers. As I have indicated, the job is made more difficult when those values and standards are conflicting or are unknown, and must be situationally determined, that is, dependent not only on who observes what, when, and where but on what has been recorded about such observations. Despite this dilemma, social workers in child welfare, for instance, are routinely expected to interpret the subtle moral, social, and psychological violations of an emotionally abusive mother or other disturbed parent-child relationships.

Nancy Cochran et al. try to capture the complexity of record keeping when they differentiate between what they call the reactive or purely descriptive aspects of the record and the proactive intentions, assumptions, and goals of the record keepers.³⁶ Their observations support the claim that organizational social control functions and personal motives precede, and therefore shape, the record. For them, understanding the grounds for record keeping is as important as the recording of the event itself, especially if an agency wants to avoid a law suit, provide documentation for the denial of welfare, or support a decision to take a family to court for child neglect. The motives of the individual social worker can be an even more complex mix and may have to do with saving time, documenting work performed, or avoiding scrutiny. Finally, language itself can be a problem.

The Official Language and Case Records

The spell created by words is at once the most obvious and the most difficult aspect of case records to explore. The nineteenth-century aphorism, "A man is his word or the words used about him," seems to have been lost in the rush of each profession to develop a terminology and tradition of its own. Bledstein credited much of the success of professionalism's rise to its ability to convince rich and poor alike of their respective areas of expertise through the medium of print. The result was to reduce all citizens to the status of clients. "In mid-Victorian America, the citizen became a client whose obligation was to trust the professional."³⁷ Little has changed; professionals have managed to hold onto their position in society through the power of their words, the convincing image they project, and the services they control. There are occasional renewed calls by consumer groups to demystify and untangle legal language, but the need for technical languages seems to have gained even greater popular acceptance. After all, legal language is still the language of billion-dollar contracts.

Social work has been no exception to the trend toward increasing specialization and the concomitant development of special terms, concepts, and technical practices. However, it is one profession that relies almost exclusively on language for both diagnosis and treatment of a population that lacks the money or ability to seek services elsewhere. Trust, then, plays an even more important role in the professional/client relationship and makes social work language central to the helping effort.

Too often, we have been captured by the spell of our own words and simply restate for the record the results of our professional training. Taking exception with this practice, Judith Lee asks, "In describing the poor, how careful have we been? And do our words betray underlying values that differ from our stated values and purposes?"³⁸ In response, she searched the literature for terms and generalizations used by helping professions to characterize the poor. The following quote from her work shows the terms and generalizations that are commonly used in characterizing multiproblem families:

Rarely are both parents in the home. Generally the mothers have lived in a common-law relationship with a number of men. . . . The families multiply rapidly. Many of the family members are illiterate because of low intelligence or emotional reasons. The mothers . . . are, for the most part psychologically too self centered and impulsive to have sufficient interest in and responsibility for their children. . . . They are also relatively disinterested in their children after they are born, or even turn against them. . . . In most cases the children are intellectually retarded or emotionally deprived and have learning and behavior problems in school. They are frequently involved in acts of delinquency.

Incest, narcotic addiction, prostitution, homosexuality, and criminal acts have been part of their family background. . . . From the standpoint of ego development they are psychotic or at least borderline in their adjustment to reality. . . . The object of this paper is to examine the transference of these clients.³⁹

I have already described how generalizations like these are arrived at on the basis of social facts, scientifically validated. But the problem with language goes much deeper and stems from the basic assumption that words derive their meaning from the things to which they refer, in a kind of timeless identity between the object and name. However, just as values, predispositions, and unconscious wishes influence perception of an event, they also influence in a less obvious way the very words we choose in the process of description. Moreover, in our attempt to communicate, we automatically resort to other words, other names to connect, extend, and deepen our thoughts.

Social casework, as I mentioned, employs the medical metaphor of study, diagnosis, and treatment, but does not actually rely on medical science to solve social problems. We do, however, borrow and extend the use of medical science terms, like pathology. Social problems are not diseases, but by using the term metaphorically we are able to describe what social workers do on the basis of the public understanding of what doctors do.⁴⁰ The problem is that we succeed in communicating our role, but we also distort the nature of social problems and what it is we actually do about them. Although language always fails, in the sense that there is always more to reality than we can communicate in words, social workers need to be intimately aware of the distorting effects of language and, more important, the inevitable political nature of language.⁴¹ Language, like our official institutions, is never neutral and reflects not only the personality of the writer but also carries the official weight of the agency supported by professional jargon in the record. Some researchers have even argued that the political nature of language is embedded within the language codes, grammar, vocabulary, and syntax of the upper and lower classes—a kind of stratification by speech.⁴² Language, words, classifications, and diagnoses define, limit, and, in part, actually determine what we are capable of seeing and the solutions we are able to achieve. When transcribed in case records, these words represent the so-called objective features of other peoples' reality, and unless we are always conscious of the symbolic effects of language, with its political ramifications, we will continue to violate a professional trust.

Confidentiality and Case Records

I suspect that it was in response to this trust that early social workers recognized the need for confidential protection for case records. Con-

sequently, there are strict legal, ethical, and professional rules governing the case record's use. They are not to be used against the client's best interest, and the material contained therein can be used only with the client's written consent and shared only with those people or agencies specified in writing. However, in most states case records can and are subpoenaed by the court over the objection of the client, if deemed relevant by a judge.

The obvious reason for the confidentiality safeguards on case records is to protect the privacy of the individual and assure the client that all personal information will be held in strictest confidence. In fact, until the passage of the 1974 Freedom of Information Act, the clients themselves were not able to see their own records. The justification usually given was that this information was now "official" information, and the case record was the property of the agency. Despite this recent legislation, clients have not flocked to read their case records.⁴³ Like most of us, unless there is a problem—a school suspension, a denial of credit, or a computer error causing our license to be revoked—we just do not think much about records. Both clients as well as case workers take for granted the quality of records. An anonymous welfare official during governmental hearings to assess the impact of the passage of the Freedom of Information Act offered the following explanation for the lack of concern about case records:

We anticipated that far more clients would ask to see their record than we could possibly process. To our surprise, this multitude did not materialize. As we look back on it now, we attribute the lack of interest to the openness by which most of the counseling, therapy, and case work operations are carried out by our local agencies. Our agencies have kept clients reasonably well informed during our involvement with them . . . to the extent that most clients probably didn't feel the record would tell them anything they did not already know. Many clients have told us this.⁴⁴

In view of our previous discussion, this seems to be an unwarranted assumption or convenient rationalization, depending on whether one is a record keeper or the person about whom records are being kept. The real concern of welfare officials was revealed in other testimony during the hearings as agency liability. Welfare officials testified that case records contained many inappropriate subjective reports written by untrained short-term workers, and that agencies should be given the right to "purge" the records or be given immunity for libelous or slanderous statements recorded beyond a certain date.⁴⁵ To my knowledge, no limited liability, access dates, or "purges" have been used to control or correct inappropriate subjective reports in welfare records. On the contrary, without attention being given to the problems of case recording by the profession, it is likely that such recording practices will continue, to the possible detriment of clients. The secrets of records

are safe with the record keepers. It seems that the rules of confidentiality offer more protection to the agency than to the client by preventing both the clients and case workers from knowing the real extent of the problem and finding a solution. Case workers are insulated from the problem by the beliefs they take for granted about records, and clients never become aware of the reliability of case records until there is a problem. Cochran et al. end their investigation into record keeping on a hopeful note: "People are vital, creative and ingenious in their record keeping skills. If we understand the process, we might be able to use it for the good of social services."¹⁶ Who has more at stake or is in a better position to understand the process and recommend solutions than social workers themselves? In an age where records and record keepers are assuming greater and greater power and authority, it behooves social workers to acknowledge their professional trust and begin again to examine the practices and assumptions of case recording.

Notes

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-of-Home Placement Rates

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article analyzes data from the Children and Youth Referral Survey as provided by the Office for Civil Rights. Out-of-home placement rates per 1,000 children under age nineteen were calculated for all states and classified according to racial/ethnic category. Compared with the national placement rate of four per 1,000, black children placed out-of-home at a rate of 9.5 per 1,000, followed by American Indian children with a rate of 8.8 per 1,000. Black children comprise only 14 percent of the population under age nineteen, but accounted for 33 percent of all children in out-of-home placement.

sponsored by the Office for Civil Rights, the 1980 Children and Youth Referral Survey undertook a national census of children and youth in out-of-home care. The survey set January 7, 1980, as the date when more than 2,400 public agencies were requested to provide information on children for whom agencies had legal custody, supervisory, or foster status. The survey was conducted to obtain information needed by the Office for Civil Rights in order to determine compliance to Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973. Intended to assist in locating agencies with potential civil rights problems with respect to the placement of children in out-of-home care, information for more than 300,000 children was collected on the date of placement, type of facility, and placement location. The following discussion is based on data derived from two sources: (1) microfilm data tapes from the Office for Civil Rights, and (2) unpublished census data on a state-by-state basis for children and youth under age nineteen.

ional Summary

Children and youth under age nineteen now constitute nearly one-third of the total population of the United States. Of the 75.7 million

Table 1

1980 NATIONAL PROFILE OF CHILDREN AND YOUTH IN OUT-OF-HOME CARE

Item	American Indian	Asian	Hispanic	Black	White	Overall
Total no in U S under age 19	621,159	1,164,165	6,280,351	10,502,210	57,080,058	75,727,923
Population under age 19 (%)	82	1 54	8 29	13 97	75 38	100
Total placed out-of-home	5,475	2,360	18,764	100,245	175,099	301,943
Total placed (%)	1 81	78%	6 21	33 20	57 99	100
Rate per 1,000	8 8	2 0	3 0	9 5	3 1	4 0
Placed 12 months or less (%)	34	47	31	27	39	34
Placed 12-36 months (%)	30	31	30	26	29	29
Placed 36-60 months (%)	14	14	14	15	13	14
Placed 60+ months (%)	22	8	25	32	19	23

children and youth recorded in the 1980 Census, more than 300,000 were receiving out-of-home care. Table 1 provides a national placement summary based on information provided to the Office for Civil Rights by 2,436 public welfare and social agencies. Data are classified according to standard racial/ethnic categories. One of the most striking findings appears in the black group. Of the 10.5 million black children in the population, approximately 100,000 were in out-of-home care. Although black children and youth under age nineteen constitute only 14 percent of the youth population, they comprise 33 percent of all children in out-of-home placement. No other racial/ethnic group was so overrepresented in the placement population. Compared with the national placement rate of four per 1,000, black children are placed away from home at a rate of 9.5 per 1,000, followed by American Indian children with a rate of 8.8 per 1,000. Other groups—Asian, Hispanic, and white—ranged between two or three per 1,000. Overall, higher percentages of minority children recorded long-term placement, that is, placement that extended beyond five years. Black children were highest with 32 percent in the long-term category, followed by Hispanic with 25 percent, and American Indian with 22 percent.

State Comparisons

Of the 300,000 children in out-of-home care, more than 200,000 were classified as legally dependent. Table 2 summarizes placement rates for children classified as dependent for each of the fifty states and the District of Columbia.

Out-of-home rates for white children ranged from less than one per 1,000 in Hawaii, New Jersey, New Mexico, and Texas to highs of 1.63 per 1,000 in Maine and 4.11 per 1,000 in Indiana. In comparison, black children and children of other racial groups were more likely to experience out-of-home placement at far higher rates than white children. State-by-state counts for black children show that placement rates ranged from 2.15 per 1,000 in Alaska to 17.81 in the District of Columbia and 18.8 in Oregon. Nearly a dozen states recorded double-digit out-of-home placement rates for black children. Furthermore, comparative placement rates by state for white, black, and other races showed that black children recorded the highest out-of-home rates in forty-one of the fifty-one comparisons.

How long children remain in out-of-home placement is linked to race/ethnicity. Of the states with 1,000 or more black children in placement, in all but one instance higher percentages of black children were in placement for five years or longer than were white children.

Table 2

OUT-OF-HOME PLACEMENT RATES BY STATE PER 1,000, CHILDREN/YOUTH UNDER AGE 19 CLASSIFIED AS LEGALLY DEPENDENT

STATE	WHITE		BLACK		OTHER RACES		OVERALL	
	N	Rate	N	Rate	N	Rate	N	Rate
Alabama	2,498	2.71	2,123	5.12	28	3.13	4,649	3.46
Alaska	240	2.30	11	2.15	510	15.34	761	5.25
Arizona	999	1.48	156	3.10	515	2.69	1,670	1.86
Arkansas	750	1.28	501	3.06	13	1.54	1,264	1.67
California	11,641	2.29	5,300	7.76	4,655	3.06	21,596	2.97
Colorado	1,472	1.80	334	8.51	698	7.47	2,504	2.71
Connecticut	1,126	1.40	800	8.81	121	2.89	2,047	2.18
Delaware...	326	2.20	397	9.98	12	2.64	735	3.82
District of Columbia	55	2.30	2,028	17.81	4	.96	2,087	14.71
Florida	4,148	2.04	2,093	3.72	308	4.04	5,485	2.45
Georgia	2,606	2.10	2,556	4.22	16	.87	5,178	2.78
Hawaii	71	.75	18	3.12	276	1.29	365	1.17
Idaho	357	1.02	6	5.80	57	3.11	420	1.22
Illinois	4,355	1.57	5,015	7.24	580	2.73	9,950	2.70
Indiana	6,698	4.11	2,192	12.75	224	7.45	9,114	4.98
Iowa	1,744	1.91	103	5.72	83	5.49	1,930	2.04
Kansas	2,096	3.16	457	8.92	113	3.87	2,666	3.58
Kentucky	2,733	2.44	622	6.12	10	1.20	3,365	2.73
Louisiana	1,823	1.91	2,350	4.43	71	3.20	4,244	2.82
Maine	1,660	4.63	22	17.61	77	15.38	1,759	4.82
Maryland	2,796	3.02	3,066	8.40	43	1.16	5,905	4.45
Massachusetts	3,996	2.34	735	8.40	365	5.65	5,096	2.96

Michigan	3,860	151	3,480	7 19	275	3 35	7,615	2.44
Minnesota	3,231	254	295	13 01	478	11 26	4,004	2 99
Mississippi	977	283	1,134	2 83	28	3 82	2,139	2 32
Missouri	5,125	387	1,985	9 63	76	3 49	7,186	4 62
Montana	415	173	6	8 79	176	8 17	597	2 28
Nebraska	1,649	347	259	12 21	196	13 93	2,104	4 13
Nevada	784	386	129	5 89	50	2 68	963	3 96
New Hampshire	1,133	389	22	13 67	15	6 06	1,170	3 96
New Jersey	1,035	59	1,251	3 37	222	1 69	2,508	1 11
New Mexico	218	67	49	4 93	398	2 32	665	1 41
New York	3,503	88	4,192	4 64*	1,080	2 32	8,781	1 64
North Carolina	3,964	2 97	3,463	6 61	261	6 06	7,688	4 05
North Dakota	275	1 34			138	10 99	413	1 88
Ohio	9,372	3 08	5,601	13 53	199	3 90	15,172	4 33
Oklahoma	947	1 19	340	4 01	927	2 38	1,514	1 55
Oregon	2,810	3 71	280	18 80	276	6 28	3,366	4 12
Pennsylvania	6,052	1 94	2,514	6 53	320	4 45	8,886	2 49
Rhode Island	900	3 44	128	11 06	13	1 36	1,041	3 69
South Carolina	1,319	1 97	1,493	3 75	63	6 27	2,875	2 67
South Dakota	214	1 00	8	9 5	439	17 00	661	2 80
Tennessee	2,776	2 36	1,267	4 35	8	75	4,051	2 74
Texas	3,093	86	1,690	2 47	1,481	2 53	6,269	1 28
Utah	636	1 12	41	10 57	187	5 60	864	1 43
Vermont	435	2 62			6	4 10	441	2 62
Virginia	2,734	2 15	2,994	7 95	47	1 18	5,775	3 42
Washington	2,532	2 20	369	9 12	519	3 11	3,420	2 64
West Virginia	1,760	2 91	262	11 33	9	2 51	2,031	3 22
Wisconsin	3,133	2 19	676	8 02	266	7 22	4,075	2 62
Wyoming	197	1 27	3	2 27	55	6 27	255	1 55

* In New York 11,091 black children were in placement under voluntary arrangement This represents a rate of 15.6 per 1,000

Table 3

PERCENTAGE AND RATE PER 1,000 WHITE, BLACK, AND OTHER RACE CHILDREN IN OUT-OF-HOME PLACEMENT FOR FIVE OR MORE YEARS BY STATE

STATE	WHITE		BLACK		OTHER RACES	
	%	Rate/ 1,000	%	Rate/ 1,000	%	Rate/ 1,000
Alabama	21	57	30	1 53	29	89
California	16	36	20	1 56	14	44
District of Columbia	76	1 76	51	9.04	50	48
Florida	14	29	32	1 18	11	46
Georgia	21	44	27	1 12	6	05
Illinois	29	45	35	2 54	35	95
Indiana	26	1 08	40	5 11	24	1 76
Louisiana	33	63	45	2 01	11	36
Maryland	48	1 45	67	5 67	21	24
Michigan	9	13	19	1 38	12	41
Mississippi	24	45	32	.90	32	1 23
Missouri	17	67	34	3 25	12	41
New Jersey	22	13	33	1.09	25	42
New York	32	28	32	1 47*	36	84
North Carolina	21	62	32	2.11	27	1 65
Ohio	20	61	30	4 04	11	41
Pennsylvania	25	49	38	2 45	20	89
South Carolina	16	32	27	1 01	24	1 19
Tennessee	20	47	38	1 67	...	...
Texas	15	13	24	.59	20	51
Virginia	34	72	53	4 23	26	30

NOTE—Only states with 1,000 or more black children in placement are included

* The long-term rate for New York in the voluntary category is 6.1 per 1,000

Table 3 illustrates the comparisons for twenty-one states, including the District of Columbia. Maryland, Virginia, Louisiana, and Indiana show relatively high percentages of black children in placement for five or more years. In Maryland nearly 67 percent of all dependent children in placement on the survey date of January 7, 1980, had been in an out-of-home facility in excess of five years. In Virginia and in the District of Columbia more than 50 percent of dependent black children were in long-term placement. In Ohio and Indiana between 30 and 40 percent of black children in care were in placement five or more years.

In addition to percentage data, the rates at which children remain in long-term placement provide useful information in that rate data are calculated against the total numbers of children under age nineteen for a particular racial/ethnic group who reside in a state or jurisdiction. The long-term out-of-home placement rates per 1,000 black children were highest in the following states: 9.04 per 1,000 in the District of Columbia, 5.67 per 1,000 in Maryland, 5.11 per 1,000 in Indiana, 4.23 per 1,000 in Virginia, and 4.04 per 1,000 in Ohio. The out-of-home placement percentages and rates cited are based only on those

states with 1,000 or more black children classified as legally dependent. A number of other states have long-term out-of-home placement profiles similar to those cited.



Local Agency Variations

National summaries and aggregated state-level data tend to obscure placement variations that exist between and among local agencies and jurisdictions within a state. In New York State, for example, nearly fifty-seven public agency locations were included in the Office for Civil Rights Survey. In Virginia the number of agencies that reported placement information exceeded 100. The 1980 Office for Civil Rights survey provides placement information for individual agencies by state and is a handy resource for mapping a particular state on an agency-by-agency basis. Table 4, for example, contains comparative percentages of black and white children in out-of-home care for five or more years for selected agency locations in New York State. Only locations that reported 100 or more black children in placement were included. Overall, nearly one-third of the out-of-home placements were for periods of five or more years. However, for black children, four of the nine locations were well above the overall "one-third" norm. Albany, Nassau, Suffolk, and Westchester counties reported relatively high long-term placement percentages that ranged from 43.8 percent to 64.9 percent. On the other side of the ledger, for Monroe and Onondaga counties only 16 percent of the black children were reported in placement in excess of five years. Two of the counties, Albany and Westchester, were relatively high in the percentage of both black and white children in long-term placement. It is clear that while national and state averages are valuable it is important to review the placement records of agencies on an individual basis.

Implications

The Office for Civil Rights has published a two-volume directory that contains national as well as state and local agency placement summaries for more than 2,400 agencies.¹ Standard racial/ethnic categories are used in the placement summaries. This document contains the most current national count of children in out-of-home care.²

Table 4

COMPARATIVE PERCENTAGES OF BLACK AND WHITE CHILDREN PLACED FIVE OR MORE YEARS CLASSIFIED BY AGENCY LOCATION IN NEW YORK STATE

AGENCY LOCATION	BLACK			WHITE		
	Total Number	Placed 5 Years or More	%	Total Number	Placed 5 Years or More	%
Albany Co.	131	85	64.9	266	128	48.1
Dutchess Co.	105	34	32.4	248	75	30.2
Erie Co.	1,135	369	32.5	1,185	348	29.3
Monroe Co.	565	91	16.1	789	159	20.1
Nassau Co.	626	274	43.8	544	143	26.2
New York City	15,069	5,252	34.8	3,893	1,266	32.5
Onondaga Co.	250	43	17.2	726	152	20.9
Suffolk Co.	405	210	51.8	838	285	34.0
Westchester Co.	867	430	49.6	494	234	47.4
Total	19,153	6,788	35.0	8,983	2,790	31.0

NOTE—Only agencies reporting 100 or more black children in placement were included

SOURCE—Department of Health and Human Services, Office for Civil Rights, *1980 Children and Youth Referral Survey, Public Welfare and Social Service Agencies Directory of Agencies* (Washington, D.C.: Office for Civil Rights, 1981), vol. 2

It remains for administrators, planners, child advocates, and community interest groups to use these survey data to best advantage. There are several ways in which the Civil Rights data base can be useful. First is the setting of priorities for areas of service to children; second is the targeting of states, as well as agencies within states, for special review based on comparative placement rates, and third is utilizing placement rates as a reference point against which to gauge state or agency progress in serving children.

National, state, and local agency data indicate that black children in out-of-home care constitute a priority population at need. Of the 82,500 black children in out-of-home placement in more than twenty states, 28,300, or nearly 35 percent, were in placement five years or more. States, as well as local agencies that are characterized by long-term placement rates for children, can be readily identified. Since 1976, a majority of states have received federal assistance for the purpose of developing permanency planning programs. Federal support was provided under the assumption that permanency planning would become an integral part of state programs serving children and families. One aim of permanency planning should be that of reducing the rates of children in long-term placement, particularly for children in the black community. The information presented provides policy analysts, research investigators, and advocacy groups with a statistical yardstick against which to measure the future progress of state and local jurisdictions in serving children, youth, and families.

Notes

This article is based on a paper presented at the National Conference on Social Welfare, 109th Annual Forum, Boston, April 21, 1982. Acknowledgement and appreciation is extended to Vardine Carter, U.S. Children's Bureau, Administration for Children, Youth, and Families, for providing information about the availability of data tapes from the Office for Civil Rights, to Robert Dunst, Office for Civil Rights, who provided access to the data tapes as well as other resource materials pertinent to the 1980 Children and Youth Referral Survey, and to Roger Hernot, Chief, Population Division Bureau of the Census, for providing population counts for states by age, race, and sex.

1. Department of Health and Human Services, Office for Civil Rights, 1980 *Children and Youth Referral Survey, Public Welfare and Social Service Agencies Directory of Agencies* (Washington, D.C.: Office for Civil Rights, 1981), vols. 1 and 2.

2. Title VI of the Civil Rights Act requires that each recipient keep records sufficient to provide "timely, complete, and accurate compliance reports." Agencies surveyed were required to certify as to the "completeness and accuracy" of the information given. According to the DBS Corporation, the organization responsible for the technical aspects of the survey, "The file reflects the most accurate data obtainable from the respondents" (see 1980 *Children and Youth Referral Survey, Public Welfare and Social Service Agencies File Documentation* [prepared under contract no. HEW-100-79 0169] [Arlington, Va.: DBS Corp., 1981], p. 1).

Debate with Authors

Contributions of Roman Catholic Religious Orders to the Welfare of Young Women

Dorothy M. Baker
Bombay University

I have just received my copy of *Social Service Review*, vol. 56 (September 1982), and I refer especially to the article "Youth Policy and Young Women, 1870–1972" written by Michael W. Sedlak (pp. 448–64).

I believe that this type of article does more harm than good because it has left out any mention of the vast network of Roman Catholic agencies that have provided services for young women, especially unmarried mothers and their children. Among the greatest women social workers in America were the Daughters of Charity of St. Vincent de Paul and the Sisters of the Good Shepherd who sheltered and guided many young women, rehabilitating them and their families in various ways. Any other agencies cannot be compared in coverage with the Catholic religious orders that provided facilities in every part of the United States through the diocesan structure.

Perhaps what is lacking is a real understanding and acceptance of Catholic religious orders of women and their activities as they existed during the period under review in the above article.

Obviously Sedlak should not attempt to write authoritatively on this subject — even the "Notes" show a glaring absence of relevant sources.

Author's Reply

Michael W. Sedlak
Michigan State University

I would like to respond briefly to Baker's comments. The dedication and contribution of both volunteers and professionals serving with Catholic agencies

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have been enviable. I never intended to give the impression that they have neglected troubled young women. My short essay was not designed to comprehensively examine the variety of religious and secular maternity care institutions over the past century. My work explores the impact of changing funding sources on the evolution of organizational missions and structures and on the nature of evangelical and professional ideology. My argument that the federated charities movement fostered the rapid dissemination and enforcement of a medically oriented, professional service strategy was illustrated with examples from the history of several pertinent agencies. Although the examples I selected to buttress this particular argument were drawn largely from the experience of Protestant institutions, my impression is that Catholic agencies eventually underwent a parallel process of change, despite the fact that the secular consolidated funding targeted at Catholic programs was ordinarily mediated by their own religious federations, often diverting and delaying the impact of professionalization slightly. Lack of access to many potentially rich Catholic record collections, however, directly impedes comparable research

Book Reviews

Models of Family Treatment. Edited by Eleanor Reardon Tolson and William J. Reid. New York: Columbia University Press, 1981. Pp. 365 \$20.00

The Charlotte Towle Memorial Conference on Family Treatment in 1979 produced this volume, *Models of Family Treatment*, an admirable and stimulating follow-up to the Charlotte Towle Memorial Symposium of 1969, which resulted in the book *Theories of Social Casework* (Chicago: University of Chicago Press, 1970). Both are directed to social workers intent on integrating theory with practice. This volume, however, goes beyond the first in recognizing and urging that research is an important arm to clinical treatment for purposes of validating theory and contributing to more effective practice. It also demonstrates how far the field of mental health, of which social work is an important part, is from achieving this goal and reaffirms the need for social agencies and clinics to establish research units within their organizations.

Charlotte Towle's contributions to the field of social work practice, philosophy, and education were enormous, and it is fitting that her creativity and influence continue to inspire the profession. Selection of the subject of family treatment for examination, with a view to analyzing it and contributing to theory building, is particularly appropriate at this time. In 1970 social workers comprised 40 percent of family therapy practitioners, according to the Group for the Advancement of Psychiatry. They are confronted with innumerable models of family treatment that exhibit both similarities and considerable differences in theory, techniques, and strategy. Which model to select, to study, master, and practice is confusing. This book should greatly help practitioners and is recommended for classroom assignments in schools of social work as well. While Sanford Sherman points out in his chapter on "A Social Work Frame for Family Therapy" that social work as a profession was family centered long before the current trend was fashionable (family and children's agencies and child guidance clinics have been so directed since their inception), during the 1930s to the 1960s it, too, shifted to the medical model, with emphasis on pathology and one-to-one treatment. Current nonmedical models do not rule out a diagnosis of pathology and focusing on the individual, but they do broaden our perspective by incorporating, in addition, interactional, group, social, personality, and ethnic issues. They also pay particular attention to the role and importance of the family as a functional unit and its influence on the individual regardless of theoretic orientation.



Permission to reprint a book review printed in this section may be obtained only from the author.

This book meets social workers' needs in particular by skillfully presenting various family treatment models: psychodynamic, small group, structural, behavioral, intergenerational, general systems, ecological, short-term task-oriented, and focused problem solution. Finally, it recommends an eclectic approach to family practice. While this entails acknowledging some contradictory models, it forces one to be selective, to pick and choose what is compatible with one's point of view and one's own approach to and style with families. However, this conclusion of the editors leaves one feeling unsettled, since they do not provide sufficient criticism and established criteria. It is too objective!

The most valuable aspects of the book are the detailed descriptions of techniques accompanying each theory that give an insight into their application, the excellent discussions of theory where applicable, and attention given to the fact that some models do not consider theory important at all, as in focused problem resolution. Readers will find the transcript of the roundtable discussion of particular interest, as the differences among the theorists are dramatically illustrated. All the family therapists at the conference reacted to a film shown to them about a family problem. It became clear that even the definition and interpretation of the problem varied tremendously, as well as recommended treatment plans. The term "family treatment" turns out to be more ambiguous now than when Ackerman and the early theoreticians started on the path to developing their theories and techniques. Yet this book is helpful in demonstrating with remarkable clarity the various elements in each model, thereby readily permitting comparisons. The authors of most chapters followed the format laid down by the conference.

In the end, one is impressed with the fact that each theory is really a partial theory that needs to be amalgamated with other compatible theories. The conference clearly demonstrated that theory building is complex and that the knowledge base for family treatment has many strands that must be woven together to create a more comprehensive, broader theory. This should include family development, individual development, psychodynamics, personality, role, cognitive communications, systems, and object-relations theories. There is sufficient content and evidence to indicate that this can be done, however difficult the task. It does not follow that we need an eclectic theory, but it does demand that the various perspectives be combined within a common theoretical base. This will leave out, however, certain practices that rely solely on description of the problem and a here-and-now approach that rejects the need to understand the underlying meaning of behavior. Tolson ably points out, in summarizing the models, that there are more models for family treatment than theories, that some models have no theoretical base, and that even the goals to be achieved vary from understanding behavior in order to effect change to merely orchestrating a change in interactions among family members because they complain that dysfunctional elements interfere with their interactions. She points to the lack of agreement on definitions of family treatment and is forced to select her own for purposes of discussion. She suggests that "a useful starting place might be to define family treatment as a form of intervention that includes work with at least two related individuals for the purpose of resolving one problem" (p. 346). This sounds simple, but it allows for the astonishing differences in definitions and practice. There is disagreement as to whether family treatment requires all members of the family to be seen, since the therapist's perspective is "family oriented." Others insist, as John Bell, that the whole family be treated or, as Sherman argued, that all should at least participate in the assessment stage. Still others, such as Ann Hartman (Bowen family system theory) and Geraldine Sparks, maintain that intergenerational understanding of family dynamics is essential. Curiously, James Framo's

reliance on object-relations theory in family treatment was not discussed in this volume, yet he, like Bowen, stresses the family of origin as part of their treatment plan.

The task-focused approach included in this volume as a therapy has not been particularly associated with family treatment. It is not a therapy with a cohesive theory. Its short-term techniques are of interest, but more than technique is needed in helping dysfunctional families. What becomes evident, as one reviews the theories, is that to offer family therapy to clients, a theoretical structure is essential. As the social scientist Gordon DeRenzo stated, "Sheer empiricism is both naive and absurd. Facts can't speak for themselves. They need interpretation. This is provided in the context of a theoretical orientation" (in *Concepts, Theory and Explanations in the Behavioral Sciences* [New York: Random House, 1966]). However, that theory must be tested and confirmed by practice is equally important, as confirmed by Emmanuel Kant's statement that "experience without theory is blind, but theory without experience is mere intellectual play" (quoted in Joan P. Riehl and Callista Roy, *Conceptual Models for Nursing Practice* [New York: Appleton-Century-Crofts, 1974]).

This very lucid and readable book should be widely read by clinical social workers, for it focuses especially on the role of the clinician and how decisions in treatment are being made. At the same time, it is concerned with the role of the social worker beyond the narrowly defined therapeutic one and points to the need to integrate the family treatment role with that of advocate, environmental assistant, coordinator of multiple services, and social diagnostician when necessary. Family treatment is one of several modalities available to the social worker to be combined with others, but it is an important one because it gives recognition to where many problems originate and where they get acted out. The greatest contribution we can make to this growing modality is to test the various family treatment theories, as discussed by Richard Wells and Tolson in this volume, adapt them as findings indicate, and evolve a more integrated, less fragmented theory that will foster family change and well-being.

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Casework: A Psychosocial Therapy. By Florence Hollis and Mary E. Woods. New York: Random House, 1981. Pp. xvi + 534. \$15.00.

When a widely used book is revised, its potential readers should know how the revision is different from the previous edition. They may also be interested in whether the differences in the new edition make a difference for the book and for its audience. These considerations are especially true for *Casework: A Psychosocial Therapy*, since it has been revised twice in almost twenty years because of its importance to social casework and education. Review is also indicated because this third edition has a coauthor.

The authors identify these differences in the new edition by stating that it "describes many developments in clinical practice over the last ten years" (since the second edition) "and demonstrates how they can be assimilated by the psychosocial approach. An extensive discussion of the theory and practice of family therapy, new material on environmental treatment, recent concepts related to client-worker relationship, mutuality, discussions of time and treat-

ment, and the contract are now included. Case examples are from recent clinical work and reflect current problems and treatment techniques" (p. vii).

Coauthor Mary E. Woods wrote chapters 10 and 11 on family treatment. She also was responsible for new content and focus in chapters 8 and 9 on environmental treatment, in chapter 12 on the client-worker relationship, for new case material in chapters 3, 9, 12, and 19, as well as for new emphases and focus in other chapters (p. vii).

How are the differences in this edition manifested? Woods's original chapters and the ones with her extensive changes clearly fit into the whole. They are part of the flow of the thesis of the book, not additions. The content is excellent and provides important improvement in the presentation of this approach.

The changes in focus, emphasis, and organization of Hollis's original chapters, including new headings and subheadings, make for tighter exposition and more clarity while permitting more elaboration of ideas and closer integration of theory and practice. Case material throughout is illuminating, clearly social work, nicely demonstrating practice and its derivation from theory. The cases in chapter 19 are especially telling in relation to the whole of the presentation of the book.

In addition, there is now a brief inclusion of the history of the development of social casework, of this particular approach, and of research in social work. Research findings are smoothly and appropriately integrated throughout and drawn from many sources, with emphasis on social work research. When the obligatory call for further research is made, it is accompanied by identification of issues, questions, and problems that need investigation for an empirical foundation for theory and practice wisdom, and for other knowledge building. There are significant, updated changes and expansions of the notes and references at the end of chapters. The authors also include descriptive definitions of several embattled terms—clinical social work, intervention, treatment, therapy, and social casework.

Woods's work on environmental treatment (chaps. 8 and 9) is a significant and superior contribution to the coherence and consistency of the psychosocial approach and its centrality to social work theory and practice. These chapters truly support the assertion in the second edition that environmental work is complex, delicate, and dynamic, requiring knowledge and skill equivalent to that necessary for "direct" work with clients. Further, the point is clearly made that environmental treatment is intertwined with all other aspects of intervention, is not separate from them, and requires some or most of Hollis's treatment procedures. There is clear exposition and demonstration of the psychological effects of environmental work. Not the least of the attributes of these chapters are the conviction that underlies them, the elaboration of Hollis's useful classification of environmental work, and refined theory and practice integration.

Similarly, Woods's chapters (10 and 11) on family therapy combine an excellent theoretical overview with detailed practice implications. There is clarifying discussion of the place, theoretically and practically, of family therapy in the psychosocial approach.

One of the interesting, subtle changes in this revision is the idea that Hollis's treatment classifications hold up, but that they are, in practice, intertwined, used in combination. Subtlety derives from the dilution of the inference that the classification represents a hierarchy of treatment from simple to complex, from less worthwhile to more worthwhile.

Finally, time and the various changes the authors have made produce an ambience of less defensiveness about the approach, more certainty about trends in this field, and greater confidence in the theory and practice of the psychosocial approach.

The third edition of this already significant work will make a contribution to practice and education and should sturdily hold up for another ten years and beyond. A most affecting aspect of this revision is its demonstration of Hollis's conviction about the solid base of theory and practice of this approach and about its flexibility for and permeability to new ideas, practice, and research. Even more affecting is the demonstration of Hollis's dedication to the profession and to its growth and progressive development

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Describing Care: Image and Practice in Rehabilitation. By Jaber F. Gubrium and David R. Buckholdt. Cambridge, Mass.: Oelgeschlager, Gunn & Hain, 1982. Pp. xiii + 195. \$22.50.

For patients in rehabilitation hospitals and their families, the stakes are high. Because of illness or injury, patients have found themselves with impairments that massively disrupt their ability to function normally. Can they overcome their impairments and regain an approximation of normal functioning? Will they remain permanently dependent on others for various forms of help? Although its mandate appears to be clear enough, the role of the rehabilitation hospital is, in fact, surrounded by ambiguities. To what extent can patients actually be rehabilitated? To what extent is the facility primarily offering custodial care to patients whose functioning will not improve? To what extent is it providing medical care for sick persons who are also disabled? When patients show improvement in functioning, to what should their gains be attributed? To the resolution of health problems? To the effective teaching of physical therapists or occupational therapists? To spontaneous recovery? To the patient's motivation and self-improvement efforts?

Describing Care is about the statements that professional staff members in rehabilitation settings make to patients, their relatives, and to regulatory agencies concerning clinical matters. It is based on observations made in an unidentified rehabilitation hospital. Authors Gubrium and Buckholdt develop the perspective that statements made by professionals reflect not only that which is described but their audience and the surrounding circumstances. Their orientation is in the mainstream of symbolic interactionism, and their findings are hardly surprising. The detailed data they present, however, illustrating the manner in which staff stage their communication to external audiences are remarkable. They show, for example, how staff interpret performance standards in working with patients, how staff attempt to urge restraint on a patient who appears to be approaching rehabilitation with excessive enthusiasm, how staff prepare relatives for the patient's return to a home setting, and how formal goal statements are manipulated to justify continuing stay in the hospital.

The study should certainly be useful for those training for professional roles in rehabilitation. (With some imagination, its lessons can easily be extended to other human services.) At a basic level, the study can be used to show students that well-staged communication is an essential aspect of job performance for professionals. More important, it may heighten practitioner awareness of the ambiguities that surround human service transactions and stimulate a search for more effective ways to deal with uncertainty in communicating with various audiences. Practitioners will also do well to contemplate the danger that audience discovery of the staged aspects of communication may undermine acceptance of their performances.

For policymakers and regulatory agents, the study is also a useful, sobering source of case data on how practitioners manipulate accountability mechanisms to achieve their own objectives. The data challenge designers of cost-control mechanisms to consider whether within limits practitioner subversion should be considered inevitable and perhaps even desirable. If the forms of manipulation described are not acceptable, regulatory agencies must devise accountability mechanisms that provide less room for practitioner discretion.

Although the study makes important contributions, it has distinct limitations. The authors neither show how their inquiry fits into the symbolic interactionist tradition, nor do they link their research questions and findings to the literature on sociology of rehabilitation. The final chapter offers a welcome overview of the accountability literature, but it is more of an afterthought than an integral part of their inquiry.

The authors also might have gone further in raising questions that go beyond the perspective of practitioners. They report at face value, for example, the efforts of practitioners to prepare families for substantial caregiving roles when the patient returns home. They do not invite questions about the possibility that in some circumstances more will be asked of relatives than is reasonable. Unfortunately, Gubrium and Buckholdt say nothing about how they presented themselves to the practitioners they observed. Of particular interest is the question of whether the practitioners were prepared to have the researchers reveal their backstage behavior. The issue here is how researchers can report findings of this nature without leaving clinicians feeling that they have been betrayed.

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Social Welfare Administration: Managing Social Programs in a Developmental Context. By Rino J. Patti. Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983. Pp. xiii + 258. \$19.95.

Despite the recent proliferation of writings on social welfare administration, the field has lacked a coherent and serious analysis of core issues and tasks that is firmly anchored in organizational theory and research. Rino Patti's conceptualization of social welfare administration represents a major contribution in filling this void and sets the standard for the intellectual enterprise required to move the field forward. This volume therefore ushers in a new phase in knowledge development in social welfare administration; it is guided by organizational theory, supported by empirical research, and is informed by the unique attributes of human service organizations. Most of all, it is devoid of some of the ideological rhetorics that, in the past, have cast the theory of social welfare administration into a sort of "Alice in Wonderland."

To his credit, the author circumscribes his domain to program management within social service agencies rather than to overall agency administration. This deliberate focus provides a great deal of coherence and continuity to his presentation of issues and tasks. Moreover, he presents a program-management model that is based on a perspective that assumes that all programs undergo a natural developmental cycle of design, implementation, and stabilization. He then suggests that each developmental phase calls for a specific set of developmental goals that in turn determines the range of administrative tasks necessary to accomplish them. He is quite careful to indicate how the organizational context of human services, which sets them apart from other bu-

reauracies, shapes both the administrative goals and tasks. By adopting such a perspective, Patti discusses administrative tasks such as planning, resource acquisition, developing an organizational structure, or staff development and maintenance as they pertain to each phase of development. He thus avoids the typical sterile approach of listing and discussing them merely as an inventory of managerial tasks.

The chief limitation of the book is that the author offers only the most cursory discussion of each of these managerial tasks and provides little in terms of skill development, namely, how to do it. Therefore, the reader who might have expected to learn specific administrative skills at some depth will be disappointed. In a sense, this is a book about the nature of social welfare administration, and not about how to administer. The book is marvelous at pointing out the unique problems facing human service administrators as they undertake the mission of program management. It sensitizes them to the myriad of political, economic, and normative issues they are likely to experience, but it is short on solutions. Indeed, it offers only a glimpse of such crucial topics as budgeting and fiscal management, management information systems, and organizational design.

The problem may lie, in part, in the manner in which Patti organizes his book. While the developmental perspective is laudable, it is apparent that many of the administrative tasks and skills transcend a particular developmental phase, though their detailed application varies with each phase. Rather than focusing on each task and elaborating on the application of specific components thereof in each stage of development, Patti focuses on the development phase, listing the various tasks needed for it. As a result, there is no full and coherent presentation of each major administrative task, but rather a truncated and segmented view of each.

Furthermore, one of the main obstacles in developing such content is the difficulty in translating managerial skills developed for the business sector to the human services. Writers such as Patti should pay closer attention to the growing managerial literature in such allied fields as health care and education. I would like to propose that effective technological transfer can occur between these fields and social welfare administration that would narrow the gap between theory and practice.

Patti concludes his book with an eloquent statement about the importance of administration to social work practice. He puts to rest, once and for all, the untenable argument that administrative skills are only tangential to direct practice. Research has shown that a large percentage of direct practitioners are called upon to perform administrative roles. Yet, Patti convincingly demonstrates that reliance on clinical skills is inappropriate and incompatible with the administrative role requirements. He emphatically calls for the development of various learning tools to ensure that direct practitioners acquire beginning knowledge and literacy in administrative skills. I could not agree with him more.

This is an important book opening a new chapter in the evolution of social welfare administration. It is also a significant contribution to social work practice in general, and should be read by all practitioners.

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Revitalizing Residential Settings. By Martin Wolins and Yochanan Wornet. San Francisco: Jossey-Bass, Inc., 1982. Pp. xiv + 314. \$18.95.

For over a quarter of a century, Martin Wolins, the senior author of *Revitalizing Residential Settings*, has been actively involved in studying and writing about

live contributions of institutional treatment. During the same period other human service scholars and practitioners, in concert with public health advocates, have been actively engaged in furthering the depopulation of facilities for the mentally ill, retarded, dependent and neglected children, juveniles, and the aged. Despite this shift of public policy away from traditional institutions, Wolins, together with Wozner, remains optimistic about the "rehabilitative" potential of these residential settings.

On what grounds should lay or professional leaders be persuaded that Wolins and Wozner are right, and that public policy should be redirected toward "revitalizing" institutions, rather than continuing (or even expanding) the closing and phasing out of these facilities? Before summarizing the arguments on behalf of the revitalization position, readers should be informed that I have recently authored a book that is sympathetic to the case for deinstitutionalization. Further, in *Deinstitutionalization and the Welfare State* I have explicitly argued that traditional institutions should not receive funds in order to upgrade their programs; instead, all new fiscal resources (maximum amount of old budget lines) should be allocated in support of the least restrictive, least segregated, and least intrusive alternatives. I have argued that to favor a revitalization policy is to continue a bias in favor of the traditional institutional system and its proven capacity to capture a disproportionate share of public funds allocated to treatment and care services. In these views, I did not open the book with a value-neutral attitude; rather, I was curious about how the authors would argue on behalf of a traditional position.

According to Wolins and Wozner, society needs its institutional facilities for three purposes: to maintain social order and to function as agents of social change. Institutions are inherently "discriminatory settings"; they "isolate residents 'by compulsion or intensive recruitment and self selection. . . from society wants to alter or strongly reinforce'" (p. 15). Rather than the old-fashioned term to describe organizations devoted to "people changing," Wolins and Wozner use the Dutch word "internat" to describe institutions serving "total needs" of inmates; the Dutch word "internat" is preferred to "institution." Internats can include monasteries for training priests and military academies for training cadets and future officers, private boarding schools, and local hospitals, as well as traditional facilities such as prisons, psychiatric hospitals, schools, and state and county mental hospitals. However, the internats "most likely to be revitalized are not the types where people voluntarily seek refuge (monasteries and military academies), but those where inmates are forced to live (prisons, training schools, and state hospitals)." The authors are primarily interested in the "reclaiming mission" of traditional internats, and their recommendations focus on the conversion of lay persons into clergy or military officers in order to promote social order and individual change; society must support and encourage a commitment to their internats. In return, internats must "segregate inmates from the community in order to achieve greater control over them and counter the forces that affect them. . . control is inevitably the underlying theme for internats as such, no matter what their populations or specific functions may be" (p. 254). However, if inmates are to be helped to change and eventually return to the outside world, they must be encouraged to participate in decisions about many areas of their lives—to the extent they can or are permitted to assume, control over these areas.

Major portions of the book are designed to provide guidance on how to organize the reclaiming function while maintaining control over the goals and functions of the organization and the activities of the inmates on behalf of society. For Wolins and Wozner, "the primary task of an internat is to control the activity that elicits the desired behavior from staff and inmates" (p.

254) Borrowing from an eclectic combination of social science concepts and the ideas of inspirational leaders of children's residences, they set forth a variety of guidelines for action on behalf of a "reclaiming mission" taking place in a "total institution"

Their belief in the vitality of institutional living is based on the assumption that internats "are all more or less effective social instruments for maintaining and changing people" (p. 1). Unfortunately, it is difficult to discern any empirical basis for believing that internats can indeed succeed in changing deviant involuntary clients any better than less restrictive and intrusive living arrangements and programs. Wolins and Wozner do not directly confront the evaluational literature that has been accumulating over the past several decades—particularly in the children's field, the area of their greatest concern. According to the soundest empirical studies, there is really no scientific basis for believing that internats—regardless of name—are indeed successful in the United States in fulfilling their reclaiming mission. Since they do not offer data from studies in other societies, the reader is expected to accept on faith the authors' assessment of what are successful and unsuccessful programs.

According to Wolins and Wozner, the Delancey Street program in San Francisco is a successful program for drug addicts, but a related program, Synanon, is an example of how a "good" program became "bad" (p. 27). However, no sound data are offered to sustain either judgment. This book is dedicated to nine leaders of institutional care, but none of the programs are claimed to have been reproduced and then scientifically assessed regarding their efficacy for transforming deviant involuntary clients into more conforming persons.

If traditional institutions—whether revitalized as a therapeutic community or a residential treatment center—are not "more or less effective" in reclaiming involuntary clients, what other basis can be offered for supporting a policy of revitalization? According to Wolins and Wozner, internats also exercise social control for the larger society. If escapes and runaways can be kept to a minimum, then they can be expected to effectively perform this primary social function. Social workers, in concert with other human service workers, might desire to "humanize" and "open up" total institutions, but it is unlikely that a revitalization policy would be supported by human service workers solely on social control grounds. It is not surprising, therefore, that Wolins and Wozner continue to assert and believe in the reclaiming ideal of internats, even though there is scant evidence that a revitalized mission can actually have the desired impact.

Despite these basic flaws, readers interested in the search for "powerful environments" to change involuntary clients may find useful nuggets of "practice wisdom" interspersed in the discussion of organizational goals, structure, and activities. Readers interested in less restrictive, less residentially segregated, and less intrusive programming and policies might be less appreciative of the ideological and funding implications of a prorevitalization policy.

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Learning from Experience: Evaluating Early Childhood Demonstration Programs. Edited by Jeffrey R. Travers and Richard J. Light. Washington, D.C.: National Academy Press, 1982. Pp. xii + 271. \$13.50.

There was a time when the goal of evaluation of early childhood programs was to prove their value and necessity. This book serves as a reminder that a

justification is no longer required. It presents a picture of the state of the art today through a study of the evaluation of early childhood demonstration projects, and does so in a manner that deals with the concerns of evaluators, practitioners, parents and children who receive services, and policymakers.

A proliferation of early childhood programs attests to the recognition of the significance of these years in the child's development. Since the 1960s, when Headstart began as an eight-week summer program and brought the advantages of preschool education long enjoyed by children of the middle class to children of poverty, early childhood programs have been on the national agenda. A review of the history of these years reflects the changes in programs that present challenges to today's researchers and evaluators.

As stated in the book, "outcome measurement, which was reasonably well adapted to the early demonstrations, has stood still while programs have changed radically" (p. 8). Early programs were focused on individual child development, and though there were variations in educational approaches across programs, the stated goal was to enhance the cognitive skills of the "culturally disadvantaged." The fate of outcome measurements limited to a criterion of cognitive change is well known in the results of the Westinghouse study (1968) that fortunately, through the intense efforts of committed parents and professionals, was prevented from being used as a rationale for discontinuing Headstart. The vigor of the protestations attesting to the impact of the program may have sparked a search for evaluation methods that would capture the multifaceted effects of programs on children, families, and communities.

This book represents a response of a distinguished panel established by the National Research Council to the need to reexamine evaluation of demonstration programs, to appraise current measures, and to recommend new approaches that could more adequately inform public policy. The report of the panel is based on extensive discussion papers by researchers in the fields of health, day care, handicapped children, preschool education for the disadvantaged, and comprehensive family service programs. By defining the current directions in these programs, such as diversity of clients and of services, emphasis on social environment, support versus intervention, individualization of services, decentralization of control, indefinite time boundaries, and integration of services, panel members proceed to rethink evaluation measurement and to formulate a framework of evaluation suitable to complex program designs.

The emergence of demonstration programs focusing on the child in the context of his family, the community in which he lives, and the social institutions that affect the life of the family signals a broadening of concern in research questions "from the child as primary focus of research and policy to the family and the social groups and institutions that are intertwined with family life" (p. 207). Programs such as Child and Family Resource Program, Home Start, and Parent/Child Centers reflect philosophies about family involvement and community action as factors affecting the child's development. This book raises basic questions inherent in measuring such comprehensive services.

The issues are complex. In order to measure programs whose goals are more global and are not confined to specific areas in child development, the necessity exists for a range of outcome measurements that measure the context and process of a program and shed light on why and how a program works or fails. While not forsaking the value of traditional experimental designs, the book suggests that process measurement appears better able to achieve these goals through observations, participant observations, in-depth interviews, measurements designed to describe what actually happens in a program, what services are provided, and what transpires between staff and participants.

The questions raised are those close to the hearts of program providers. How does one measure multiple outcomes in programs with broad goals? How does one measure outcomes across multiple domains based on the family's expressed needs? In day care does one examine traits in children in terms of possible enduring changes, or focus on the immediate well-being of the child? How does one measure the quality of the environment and the quality of life?

Program providers will also find it encouraging to note that evaluators are beginning to value descriptive data more—numbers of people attending programs, frequency of participation, kinds of services received—as legitimate measures of program effectiveness. Since such descriptive data are accepted as valid when the assumption is made that a service has value, as in health care, or services to the handicapped, it behooves us to consider the intrinsic value of other services, such as family resource programs or day care.

The frustration of practitioners who "know" the effects of their programs and find standard measurement outcomes painfully inadequate in demonstrating the program's total result, sometimes even distorting effectiveness with statistics on discreet behavior changes, will be lessened by an awareness of the concerns addressed in this book. For practitioners the book presents the promise of evaluations that indicate an understanding of the context in which they function and in which outcome measures fit goals.

At the same time, the responsibility of programs to have clearly enunciated goals becomes strikingly apparent. The onus of evaluators to conceptualize a new concept for evaluation is matched by the necessity for programs to conceptualize the theoretical framework on which they function. By studying the evaluation issues raised, program providers are stimulated to rethink their intentions, philosophy, and goals.

There is a common perception that research and policy exist as separate entities exerting little influence on each other, or that the time lag between research results and policy reflecting those results is so long that possible effectiveness is lost. This work is replete with references to the interconnectedness between evaluation results and public policy, indicating serious and direct impact. It confirms a belief that evaluation can affect policy directly, and indirectly, as when a climate of opinion is changed—for example, toward accepting the significance of early intervention. The results of the Ypsilanti Perry Preschool Project have been influential in this direction. The work of the Children's Defense Fund in its national study of nonenrollment of school-age children, *Children Out of School in America*, provided data that policymakers at state, local, and federal levels could ill afford to overlook. The Abt Association study of children in day care affected formulations of the Federal Interagency Day Care Requirements as well as state and local day care licensing and standards.

Unfortunately, it is also true that factors such as cost or political attitudes toward government regulations have limited the potential use of evaluation information. Researchers and evaluators who seek to influence public policy will benefit from the methods suggested on how to reach policymakers by better meeting their needs, and how to communicate findings in ways that will enable policymakers to translate findings into action.

Particularly in these times of budget cuts for human services, we should be aware of the contributions of outcome measurement to decisions of policymakers. Similarly, the competition for private funds necessitates evaluation processes that determine effectiveness of programs. In addition to demonstration programs, there is an upsurge of family resource programs around the country based on the assumption that the child is best served when attention is given to the web of relationships within which he grows. It is therefore essential

that the tools of measurement are adequate to the task not only to encompass the comprehensive scope of present programs, but to test the basic assumption that the best way to help the child is to work with the family and community. The panel members accept the challenge and seek outcome measures that are "multi-dimensional, multi-determined, occurring within a particular context, changing over time" (p. 249).

This is an important book. It is an indispensable aid to practitioners and researchers concerned with narrowing the gap between them—a gap stemming from lack of understanding of each other's disciplines so that their roles become confrontational rather than complementary. Aware of the distance between what is measured and what is actually accomplished, the authors of this work are thoughtfully seeking alternative directions in evaluation procedures. They are attuned to problems arising when available measurements, rather than program goals, determine the evaluation, sometimes to the detriment of the program. They are attempting to assist programs to improve their functioning by increasing their knowledge of how the program does or does not work, to view programs in the context of their own goals, and to be sensitive to the impact of the evaluation on the program and its participants.

By doing so, evaluations can stimulate both evaluators and practitioners to think about theory, about methodology, and about formulations for public policy. In their own words, "We have argued consistently that if evaluation is to accomplish its goal of helping to improve programs and shape policies, it must be attuned to practical issues, not only to the interests of discipline-based researchers and methodologists" (p. 44).

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Making Policies for Children: A Study of the Federal Process. Edited by Cheryl D. Hayes. Washington, D.C. National Academy Press, 1982. Pp. xiv + 265. \$13.95.

Social scientists are constantly vexed about the policymaking process—about its complexity, confusion, idiosyncracies, and imperviousness to social science evidence. Child advocates have even more to be vexed about, since the process so often seems to work against the interests of programs for children. *Making Policies for Children* is one in a series of monographs from the Committee on Child Development Research and Public Policy of the National Academy of Science. Some of them are devoted to specific policies and others to broader overviews of children and families. The special goals of this study are to "gain some understanding of how federal policy for children is made," to "identify some of the conditions and constraints," and to "understand how the participants in the formation of federal policy for children influence the decision-making process" (pp. 5–6). Implicit in the study is the hope that advocates and social scientists can improve policies on behalf of children if they understand the process better.

Three case studies, largely written by John Nelson, form the heart of the book: one investigates the convoluted history of the Special Supplemental Food Program for Women, Infants, and Children (WIC), another traces the development of the Federal Interagency Day Care Requirements (FIDCR) since the 1960s, and the third examines the development of tax deductions and credits for child care. The choice of these three areas was felicitous, though not because these policies have involved huge amounts of money. WIC, a

"motherhood and apple pie" program whose value has been confirmed by several rigorous evaluations, has still been under constant political pressure; the FIDCR example illustrates a regulatory (rather than funding) effort that generated the support of large segments of the child development community; and the child care tax credit illustrates a third type of program—a case of tax expenditure—that now constitutes the largest source of federal support for child care. The case studies themselves are thorough, even encyclopedic. Inevitably they are out of date, only one of them seriously. The case study of FIDCR ends with regulations being issued by the Department of Health, Education, and Welfare in March 1980; however, later in 1980 Congress delayed these regulations in an atmosphere of budget cutting and deregulation. Thus the real story is not one of success, but one of failure to pass federal regulations despite a decade of efforts, the mobilization of many child advocates, and the power of a great deal of expensive research.

While those concerned with children and interested in policymaking will find a great deal of raw material in these case studies, *Making Policies for Children* contains no real attempt to integrate the case studies or develop meaningful conclusions. The summary of the case studies is little more than a listing of the obvious elements that affect all policies: "constituency activities," "principles and ideas," research, and the like. The book then proceeds to develop from these a "framework" that distinguishes among high-level, middle-level, and low-level decision making, an attempt that is both banal and unproductive of any real insights. In summarizing why policymaking often turns out badly for children, the conclusion restates the familiar observations that child advocates are often uninformed and that there is no "focal point" within the government for children's issues. The only powerful insight of the volume, that programs for children have been hampered by the lack of consensus on public responsibility, in a society where families are considered private and children are a private responsibility, comprises a half page and leads to no suggestions about what (if anything) might be done about this barrier.

The analytic failures of this volume may have resulted from its authorship by a committee, but a different reason is that the emphasis on the minutiae of policymaking—the committee hearings, what particular advocates said to whom, who's on the inside track—is itself a barrier to understanding. Some historical understanding, insights from comparing the United States with other countries, and theoretical and philosophical perspectives, all available from the membership of the committee that sponsored this volume, are necessary to developing an analytic perspective. Given that many programs for children emphasize children in poverty, some attempt to grapple with the political consequences of inequality, whether described as inequalities of class, of income, of race, of socioeconomic status, or of power, is essential to understanding the hostility to poor children and their parents frequently expressed in public debates. Without these perspectives, case studies can yield a mass of detail but little understanding.

In particular, focusing on the details of the present policymaking process makes it impossible to consider a truly frightening prospect, that democratic politics as it is now structured cannot possibly work in the interests of children. From this broader perspective, the confusion, fragmentation, frequent incompetence, and failure to develop a consensus on public responsibility originate in the basic structure of democratic institutions, and fundamental changes in democratic mechanisms, and in the economic and social institutions underlying them, may be necessary to the cause of children. (This argument, along with the basic dilemma of establishing public responsibility for children, is developed at greater length in my book with Marvin Lazerson, *Broken Promises: How*

Americans Fail Their Children [New York: Basic Books, 1982]) The implication is that improving the issues of children may require understanding of the policy process and sophistication in lobbying, but it also requires a willingness to grapple with the more serious deficiencies of our democratic and economic institutions as well.

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Juveniles in the Family Courts. By Michael Fabricant. Lexington, Mass.: D.C. Heath & Co., 1983. Pp. xv + 156. \$21.95

Fabricant's new monograph presents an excellent description and analysis of the New York City family court as an example of what he labels "the legalist model of juvenile justice" (p. xiv). The impact of the defense attorney in that juvenile court's proceedings is convincingly documented, in many ways providing grounds for the critics in *In re Gault* to assert, "I told you so!"

In the fifteen years since the Supreme Court's 1967 decision in *Gault*, defense attorneys have firmly established their presence in juvenile court proceedings. Prior to *Gault*, legal counsel for the child was seen as unnecessary and even undesirable since juvenile cases were assumed to be nonadversarial, with all concerned seeking only to help the child. *Gault* changed all of this in 1967, imposing defense counsel upon the juvenile justice system as the often unwelcome houseguest. The Supreme Court continues in their support of a "defense advocate" version of counsel, as was expressed in its 1979 decision in *Fare v. Michael C.*

Of course, a defense attorney for the juvenile brings along in his or her briefcase all of the skills, techniques, strategies, and tactics of the defense attorney trade. The unavoidable result is a much more legalistic process with considerable delays and a high incidence of dismissal. Fabricant has documented these phenomena quite vividly as they operate in concert with other factors in the New York City family court.

Fabricant begins with a very brief but reasonably well-executed review of the literature documenting the well-known evolution of juvenile justice from a rehabilitative, nonpunitive process, to disillusion, to *Gault*, to the recent American Bar Association Standards for Juvenile Justice. Chapter 2 sets out the provisions of the New York Family Court Act, with pertinent judicial gloss, and explains how all of this has been implemented in the New York City family courts. The chapter is thorough and accurate, but the tenor of the presentation tended to bother me. Perhaps since Fabricant is a member of the City University of New York faculty, he can be forgiven for his incessantly auditory references to New York, but one might suggest that his analysis could have benefited from a less myopic view that could have considered the experiences of jurisdictions other than New York.

Having largely set the stage for his inquiry, he then turns to specific identification of the types of problems affecting the court in 1975-78. Chapter 3 relies on media and government reports to document increased delinquency and crime, continuing family court dysfunction, corresponding leniency in dispositions, remarkably high dismissal rates, and considerable delay in the process.

The second half of the book makes a valiant attempt to identify and describe the causes of the problems identified in the first half of the book. The techniques

used range from qualitative interviews with court personnel to quantitative tracking studies of juveniles in the family court

Fabricant uses excerpts from interviews to illustrate various manifestations of internal disorganization, including disrupted lines of communication, confused scheduling, and turf battles. This well-known but still depressing reality was abetted by substantial budget reductions that further debilitated the court's functioning.

The most unique and important contribution made by this book is in chapter 5, which "inquires whether the court's malfunction can be traced to the advantageous position of the Legal Aid Society's defense attorney relative to the corporation counsel or prosecuting attorney" (p. xv). Fabricant again uses qualitative, anecdotal information to illustrate the lack of a balanced adversarial process due to the law guardians' greater numbers, greater support staff, and clearer role in the process.

Chapter 6 tracks the experiences of delinquency and Persons in Need of Supervision cases in the Brooklyn and Bronx family courts. This quantitative inquiry bolsters the previous qualitative investigation and concludes that a defense counsel has a pronounced effect upon the proceedings. Indeed, the data suggest that the Legal Aid Society's law guardian was even more effective than panel attorneys or private lawyers.

Fabricant's concluding chapter is a very good closing of an excellent work. He reminds the reader, in a clear, succinct summary, of the foregoing descriptions, analyses, and findings. Standing on this carefully constructed stage, he then considers the broader socioeconomic forces resulting in the present juvenile court and provides limited generalizations from juvenile justice to other sociolegal, welfare areas. His concluding criticism of single-variable solutions (such as defense counsel in juvenile court) for complex, multivariable social problems seems obvious, but is so often ignored and/or misunderstood

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Income-tested Transfer Programs: The Case For and Against. Edited by Irwin Garfinkel. New York: Academic Press, 1982. Pp. xiv + 554. \$49.50

This book contains the papers and discussant comments from a March 1979 conference at the Institute for Research on Poverty on the income testing of transfers. Irwin Garfinkel, the editor of the volume, provides an introduction to the issues and the role of each paper, and also a summary chapter that culminates with his own policy recommendations.

In my judgment, the quality of the papers and the discussant comments is remarkably high, although there is much variation among the many individual contributions. The scope of the book is impressive. The authors of the papers come from a number of disciplines, and they treat the issues related to income testing of transfers from economic, political science, and sociological perspectives. Anyone interested in the subject will have much to learn from this book.

This valuable book does, however, have a major fault characteristic of conference volumes: it is too long and diffuse for most of its potential readership. The problem is aggravated by some papers being too detailed and not always relevant to the main theme. Also, there is some inevitable redundancy in the papers and discussant comments. Some of the discussions contain the best insights in the book, however. I believe that the book would have been more useful for most readers if it had been a monograph of perhaps half its length.

by an author who summarized all the essential points and presented both sides of the debate fully and fairly. Garfinkel's concluding chapter could well have served as the nucleus of the kind of book I have in mind.

The distinction between income-tested and non-income-tested transfers is deceptively straightforward. Traditional welfare programs are designed to limit benefits to the poor and therefore pay benefits only after rigorous means tests. In contrast, the benefits of free public elementary and secondary education are available to families at all income levels. A major contribution of this book is to show that this apparently common sense distinction does not bring out the fundamental differences between transfer systems. Instead, the correct distinction is between overall tax and transfer regimes that impose relatively high marginal tax rates on the earnings and other income sources of the poor and near poor, and those that do not. Thus, a system that emphasizes traditional welfare programs provides benefits to poor households that are reduced (taxed) at a much higher rate for recipients who earn additional income than the rates paid by nonpoor households on additional income under the personal income and payroll taxes. In contrast, a system with a single-rate universal credit income tax would subject the poor only to the same tax rate applicable to all other households. Once this point is grasped, the distinction between transfer systems is more complex than the usual distinction made between income-tested and non-income-tested transfers. As Kenneth Arrow observes, "Indeed, any program of taxes and transfers which aims to redistribute income, if only to alleviate poverty, is by definition income tested. This is true whether the marginal tax rate is increasing, decreasing, or constant" (p. 320).

Garfinkel is, by his own admission, a strong advocate of reducing reliance on income testing in the current U.S. system of transfers. In the concluding chapter of the book, he judges that the evidence put forth in the preceding papers and discussions generally supports his position. "For the time being we conclude that the best economic research on the issue indicates that income-tested programs, which impose the highest tax rates on the poorest people are, at the very least, not clearly superior to non-income-tested programs on economic efficiency grounds, and indeed that non-income-tested programs may be more efficient" (p. 506). He comes to much the same conclusion on the evidence pertaining to other, nonefficiency issues such as the degree of stigma attached to income-tested and non-income-tested transfers. On the basis of his reading of the evidence, he puts forward four major reforms of the current transfer system. As a package these reforms would greatly reduce marginal tax rates on poor and near-poor households.

My own reading of the same evidence leads me to a more skeptical position, both on the efficiency and nonefficiency grounds for less income testing. Much depends on which side of the issue has to bear the burden of proof. The underlying problem is that even the very good social science research reported in the papers in this book does not suffice to settle the critical, complex issues involved in income-testing transfers. We know the shortcomings of the present system, but we can only make guesses—more or less educated by the limited relevant evidence—about the net advantages of going to a drastically different alternative system.

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Human Service Organizations By Yeheskel Hasenfeld. Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983. Pp. vi + 276. \$19.95.

The coeditor of a widely used and respected reader on human service organizations (HSOs) has now assayed the task of preparing a comprehensive

treatment of this class of organizations. He has put together a concise, tightly organized set of propositions that are both logically developed and richly defended by numerous references to relevant illustrative studies. The author is concerned with analyzing the circumstances, both internal and external, that inhibit or enhance the ability of service providers to promote client welfare, and in so doing identifies the social, political, and organizational elements that affect these particular social structures.

Service-providing organizations are viewed essentially as existing in a field of forces, all competing for dominance or control. Internally, organizational members contend with one another for a claim on resources, often through competing coalitions. Externally, a variety of environmental influences affect resource allocation and control. The result is a Hobbesian social world of persistent conflict and contention. Thus, knowledge of power, interest group theory, economics, and politics become essential for understanding the place and dynamics of human service organizations in the overall scheme of things. Dominating the book's analyses is the thoroughgoing political economy perspective. It is therefore natural to find chapters devoted to organization—environment relations, organizational goals, organizational technology, structure, power and control, and organizational change.

A series of characteristics of HSOs is iterated and reiterated throughout the book. *they encounter competing values and interests, they exhibit ambiguous and competing goals, they operate in turbulent and unstable environments, service technologies tend to be indeterminate, and the loose coupling of internal structures shields the contributions of organizational units to the total enterprise.* Many of the problems that confront these organizations flow from these characteristics. This is nowhere seen with more striking force than in the issues presented in assessing organizational performance, to which a brief and incisive chapter is devoted.

Hasenfeld has brought together an impressive array of relevant research that illustrates the major concepts he has identified for analysis. Case examples drawn from the literature are strewn throughout and add cogency to the book's content.

For all its comprehensiveness, this volume leaves the reader with some conceptual discomfort. In the final analysis, one is uncertain as to the boundaries that divide HSOs from other organizations, or the utility of including credit-rating bureaus and residential treatment centers under a single general category. If, as one might suppose, one practical reason for making useful organizational classifications grows out of the virtues of associating training, culture, and functionaries with organizational types, then the catchall character of the HSO concept raises more questions than it solves. One is left to wonder whether the book implies a distinction between social and human services, and if so, what the differential criteria are. The practical consequences for professional concepts of service delivery may be significant.

The concept of HSO that permeates this book seems at one and the same time too broad and too narrow. When the former, the field becomes fair game for any profession looking for new fields to conquer, whether or not their experience and substantive expertise qualifies for competent practice. If too narrow ("the core technology is embedded . . . in face-to-face interaction between staff and clients" [pp. 120–21]), important dimensions of advocacy and planning are left out.

There is little in the book to suggest the relationship between organizational theory and administrative theory. In an interesting chapter on theoretical approaches to HSOs, this distinction seems to have evaded the author. While the two concepts appear to overlap, they essentially deal with different kinds

problems, such as does personality theory as opposed to the practice of therapy. Administrative theory deals with practice, while organizational analysis is concerned with understanding essential dynamics.

There are several issues with which one might cavil with the author. While acknowledging that organizations need flexibility to change with uncertain environments, resisting change when a repressive political ethos prevails has a larger policy import. Holding the line on quality service goals, entitlements, benefits become progressive goals.

The brief chapter on assessment of organizational performance adopts a fiscal economy perspective. By this is meant that an organization's ability to acquire resources provides appropriate criteria of effectiveness. In this view, existing agencies' criteria may supersede an organization's objective of meeting its needs. Projections of efficiency and a cost-benefit calculus all too frequently subordinate service integrity.

The reviewer frequently finds imprecise or overgeneralizations in this volume. "Social workers are subject to pseudotherapeutic not task oriented supervision" (p. 164). "Supervisors judge and evaluate their colleagues on the basis of agency rather than professional goals" (p. 164). Much of actual practice contravenes these observations.

While one may have to work at understanding the material in this book, particularly its more abstract allusions, such effort will be well rewarded. This is a major work, at once comprehensive, thoughtful, and in many ways original and pathfinding. It fills an important gap in human service organization literature.

Simon Slavin
Hunter College

Brief Notices

The Abortion Dispute and the American System. Edited by Gilbert Y. Steiner. Washington, D.C.: Brookings Institution, 1983. Pp. x + 103. \$6.95.

This book is the result of a symposium organized by the Brookings Institution on the effects of the abortion dispute on the American system. The general conclusion of the contributors and symposium participants was that the dispute does not undermine governmental institutions.

Standards for Evaluation Practice. Edited by Peter H. Rossi. New Directions for Program Evaluation. A Publication of the Evaluation Research Society, no. 15, September 1982. Scarvia B. Anderson, Editor-in-Chief. San Francisco: Jossey-Bass, Inc., 1982. Pp. 101. \$7.95.

A volume containing the standards of the Evaluation Research Society for program evaluation. How the document was arrived at and its implications are also discussed.

Health Policy in Britain: The Politics and Organisation of the National Health Service. By Christopher Ham. Atlantic Highlands, N.J.: Humanities Press, 1982. Pp. ix + 181. \$23.25.

A comprehensive book on the National Health Service. It encompasses the development of health provision, analyzes health policy, and describes the implementation of services in Britain.

Social Work and Child Sexual Abuse. Edited by Jon R. Conte and David A. Shore. *Journal of Social Work and Human Sexuality*, vol. 1, nos. 1/2, David A. Shore, Editor. New York: Haworth Press, 1982. Pp. xiv + 184. \$20.00.

The charter issue of a new journal focusing on issues of social work and human sexuality. It presents current information on the problem of the sexual abuse of children and discussion on the role of the social worker in response to such abuse.

Community Organizing: Theory and Practice. By Douglas P. Biklen. Englewood Cliffs, N.J.: Prentice Hall, Inc., 1983. Pp. xii + 321. \$22.95.

An examination of the theoretical and practical aspects of community organizing in a variety of settings, the history of organizing, and the individual organizer.

Human Service Practice with the Elderly. By Marion L. Beaver. Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983. Pp. xii + 291. \$22.95.

An introductory gerontology text that combines an overview of the field with social work practice. The author believes that specialized knowledge and skills about aging and the aged should be the foundation of those who want to work with older people.

From Asylum to Welfare: The Evolution of Mental Retardation Policy in Ontario from 1831-1980. By Harvey G. Simmons. Toronto: National Institute on Mental Retardation, 1982. Pp. xv + 355. \$24.00.

An analytical study of mental retardation policy in Ontario from social history and social policy perspectives.

Legal Reforms Affecting Child and Youth Services. Edited by Gary B. Melton. *Child and Youth Services*, vol. 5, nos. 1/2. Jerome Beker, Editor. New York: Haworth Press, 1983. Pp. 150. \$30.00.

The contributors to this volume examine the significance of recent changes in laws affecting child and youth services.

Organization and the Human Services: Cross-disciplinary Reflections. Edited by Herman D. Stein. Philadelphia: Temple University Press, 1981. Pp. ix + 254. \$29.95.

All the essays in this volume were specially prepared for a conference held in March of 1979 at the Center for Advanced Studies in the Behavioral Sciences in Stanford, California, and have not appeared elsewhere. The purpose of the conference was to examine recent developments in organizational theory and research and their effects on human service organization. Among the authors whose work is included are David Austin, University of Texas; Mayer J. Zald, University of Michigan; and Regina E. Herzlinger, Harvard Business School.

Mental Health and Aging: Approaches to Curriculum Development. Formulated by the Committee on Aging, Group for the Advancement of Psychiatry, vol. 11, publication no. 114, April 1983. New York: Mental Health Materials Center, 1983. Pp. xiv + 105. \$9.00.

monograph written especially for directors of training in psychiatry. The application of its concepts, however, is of interest to social workers and others involved in direct care of the elderly.

Competitive Tension in Delivering Social Services and Programs: The Role of CAPS in Rural Minnesota. By Esther Wattenberg. Minneapolis: Center for Urban and Regional Affairs, 1982. Pp. vi + 55.

study examining rural Community Action Programs in Minnesota in regard to the opportunities and the limitations they experience in influencing decisions.

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at the county level as to how resources are allocated for social services and programs. The study challenges some of the assumptions underlying the implementation of block grants.

Techniques of Brief Psychotherapy. By Walter V. Flegenhimer. New York: Jason Aronson Book Publishers, 1982. Pp. xv + 206. \$25.00.

This volume provides a comprehensive look at the various approaches to brief psychotherapy and their common elements.

The Chicago Area Project Revisited. By Steven Schlossman and Michael Sedlak. A Rand Note prepared for the National Institute of Education. Santa Monica, Calif.: Rand Corp., 1983. Pp. xix + 123.

An analysis of the Chicago Area Project, an experiment in community-based delinquency prevention during the 1930s and 1940s. The analysis is part of a larger study on past and present innovative approaches to delinquency prevention.

Delivering In-Home Services to the Aged and Disabled: The Wisconsin Experiment. By Frederick W. Seidl, Robert Applebaum, Carol Austin, and Kevin Mahoney. Lexington, Mass.: Lexington Books, 1983. Pp. xvi + 197. \$23.95.

A report of the findings of the Wisconsin Community Care Organization, a six-year demonstration project emphasizing the prevention of premature or inappropriate institutionalization of the elderly, disabled, and chronically ill.

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